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Therapeutic notes

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NO. 1 FIFTH YEAR MAY, 1898

Therapeutic Notes

PARKE, DAVIS & COMPANY, DETROIT, MICH., U.S.A.

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in the manufacture of fluid, solid and powdered extracts. It is a matter of fact, however, that pharmaceuticals prepared with methyl spirit (wood alcohol) are being offered the pharmacist at temptingly low prices.

Since the public estimate the physician's skill, not by familiarity with technical details, but by actual results, your reputation is endangered when your prescriptions are filled from extracts prepared with wood alcohol.

We think, therefore, we are justified in asserting that your best interests, as well as ours, will be served by specifying P., D. & Co. And not alone because of the fact that not a drop of wood alcohol do we use, but from the additional assurance of purity and therapeutic value accruing from assays and physiological tests.

Our preparations from drugs of determinable strength are regulated by assay and adjusted to a uniform standard, **irrespective of the quantity of the crude drug required.** The preparations of those drugs which cannot be so standardized, such as Indian Cannabis, Digitalis, Strophanthus, etc., **are tested physiologically upon animals.** We thus *guarantee* every fluid, solid and powdered extract of our manufacture to be of full therapeutic value and free from contamination.

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Branches in New York, Kansas City, Baltimore, and New Orleans.

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When one of these tablets is dropped into a glass of water, it dissolves rapidly with brisk effervescence, and yields a sparkling draught of lithia water superior to that ordinarily obtained from natural springs.

Their stability has been thoroughly tested by exposing samples under most unfavorable conditions in moist atmosphere. You will find them entirely satisfactory.

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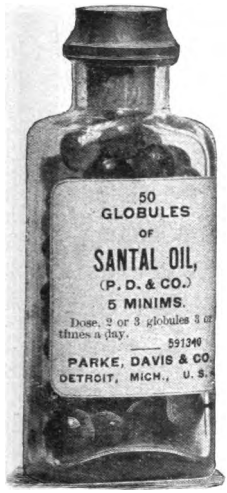

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It is next to impossible to purchase an absolutely pure Oil of Santal. We import the sandalwood and distil the oil in our own laboratory. There can therefore be no question concerning the purity of

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Another point: Please notice the label. Nothing thereon concerning the therapeutic properties of Santal Oil which would serve to place the remedy within the reach of the laity—strictly ethical.

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Your Special Attention to This, Please!

Take two test tubes. Pour into one a small quantity of Parke, Davis & Co.'s ERGOT ASEPTIC; into the other, an equal quantity of any one of the ordinary preparations of Ergot on the market. Add to each from three to five volumes of alcohol. Parke, Davis & Co.'s ERGOT ASEPTIC remains clear; the other is precipitated. This precipitate consists of extractive matter and ergotinic acid, both of which are very objectionable in ergot preparations intended for hypodermatic administration.

Extractive matter is inert, and causes abscesses. Ergotinic acid is a nerve depressant and irritant.

Aside from being entirely free from both extractive matter and ergotinic acid, Parke, Davis & Co.'s ERGOT ASEPTIC is physiologically tested and standardized. Hermetically sealed glass bulbs exclude all germs or other contaminating substances. It is entirely free from both acid and alkali. No alcohol, glycerin, salicylic acid, or other preservative is added which might prove irritating. Each bulb contains one cubic centimeter, representing two grammes of standard Ergot. Every bulb is sterilized, and the total absence of bacteria is evidenced by the fluid remaining limpid. "It is very rapid and powerful in its effects, producing strong uterine contractions within a surprisingly short time."

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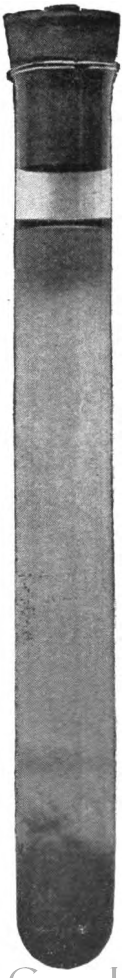

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Therapeutic Notes

FIFTH YEAR. DETROIT, MICH., MAY, 1898. NO. 1.

THERAPEUTICS.

NUCLEIN IN SCROFULA.

BY OSCAR R. TOMLINSON, M.D.,
New York Infant Asylum, Mount Vernon, N. Y.

I have endeavored to ascertain if some one of the newer remedies would not be of benefit in those cases we used to call "scrofula," and in fact all of the cases in which we meet with enlarged lympathic glands, and with persistent discharges from the nose and ears, sore gums, skin eruptions, etc. My attention was attracted a few months ago to nuclein solution, and I thought perhaps it would be of benefit in the class of cases above mentioned if it should really prove that the administration of the solution promoted leucocytosis, for if it should do this and if the leucocytes are, as they are theoretically supposed to be, the scavengers of blood, should we not reasonably expect a beneficial effect from its administration in such cases? I have used the improved nuclein solution 5-per-cent. *per orem*, and the results have been so entirely satisfactory that I will continue its use.

NUCLEIN SOLUTION PROMOTES LEUCOCYTOSIS.

To be quite sure that the nuclein solution does promote leucocytosis, I made careful counts of the leucocytes in four cases, which will be described in detail further on. It will be noted, in referring to the table below, that in three of the four cases there was a satisfactory notable increase of weight during the administration of the nuclein solution. It will also be noted that in Case 1 the number of leucocytes decreased between April 9 and 24, due, I think, to the insufficient dose of nuclein, which was probably not enough to make any real impression on the blood condition, and the advance of the disease. From April 9 to 24 in this case I gave only half a drachm three times a day. On the 24th I increased the dose to one drachm, and on May 1 to one and a half drachms, and found on May 5 that the number of leucocytes per cubic millimeter had gone up from 6000 to 22,000. I am, however, at a loss to account for the decrease in the number of leucocytes during the latter part of the treatment of Cases 2 and 4, but whatever may be the cause of this the cases improved very rapidly and in a satisfactory manner. It will be noted from the table that the administration of nuclein solution caused an increase in temperature in all cases. Quite early in my experiments with this preparation I reached the conclusion that until a sufficient dose was given to produce some elevation of temperature, I would not expect any very rapid improvement.

Another thing which attracted my attention was the evidently stimulating properties of nuclein solution, for when I gave it to Case 5 the child was suffering from a suppurating abscess; the amount of the discharge was markedly increased, so much so that I felt somewhat doubtful about the advisability of continuing the treatment, but did so, and the results were entirely satisfactory, as will be noticed on referring to the record of this case. This effect of temporarily aggravating the suppuration is a very interesting fact and well worth careful consideration, but it should not discourage us from using the remedy, for it has convinced me of the strikingly stimulating effect of nuclein and, I might say, aggressive qualities of the leucocytes in endeavoring to rid the body of detrimental germs. In

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a case of "scrofula," if administered before suppuration commences, I feel sure it will prevent it, but after suppuration has actually taken place it will increase it, but at the same time make the final cure all the more complete.

[For detailed report of cases, see original paper in *Journal of the American Medical Association*, 1897, p. 478.]

I will also report five cases in which the results of the treatment were just as satisfactory, but in which I did not take time to make blood counts, as I thought the four cases above given would be sufficient to illustrate the increase of leucocytes due to the administration of nuclein solution.

Case 5.—E. K——, female, aged three years. Had bronchopneumonia, which was followed by whooping-cough; then chronic bronchitis; then there was another attack of bronchopneumonia followed by a foul-smelling discharge from the right nostril and right ear. Bleeding gums; restless and irritable. I began the treatment by administering half a drachm of nuclein, but soon increased the dose to one and a half drachms, which produced only a slight rise in temperature; but the child improved rapidly. For a week after the treatment was begun the discharge from the ear and the nostril was largely increased in quantity, and the odor of the discharge also appeared to be increased. After the first week the discharge gradually diminished, first in odor and then in quantity. The child became bright and playful, and finally the nostril healed; there had been so much loss of tissue that the healing process almost closed the opening. The ear healed also. The lung symptoms disappeared, and within five weeks from the beginning of the nuclein treatment the child was apparently perfectly well.

Case 6.—N. R——, female, aged two years and six months, listless, emaciated, chronic eczema with boils in various parts of the body. Discharge from left ear. Nuclein, one drachm, was given three times a day, and all of the symptoms, including the eczema, disappeared and the child became energetic and playful. I do not attempt to account for the relief of the eczema from the administration of the nuclein, but it certainly disappeared with the other complications after only three weeks' treatment.

Case 7.—A. K——, female, aged ten months. The submaxillary glands were swollen, were large and sensitive to the touch, and it appeared as if they were on the verge of suppuration; but within a few days after the nuclein treatment was begun the glands began to subside, and after four weeks' treatment the child was entirely well.

Case 8.—L. H——, female, aged one year. A typical case of "scrofula." One of the glands was already suppurating when I began the treatment. Immediately after two more glands broke down and there were large quantities of pus thrown off. The suppurative process appeared to be hastened for a time, but within six weeks from the beginning of treatment there was no evidence of the disease remaining.

Case 9.—A. H——, female, aged eight months. Another case of "scrofula." Two glands were discharging. Soon after the administration of nuclein was begun the discharge disappeared, and after three weeks' treatment the patient was discharged cured.

I fully appreciate the difficulties involved in the treatment of cases of this character with nuclein solution, but I feel that I can urge upon the profession the importance of the remedy and that it is worth while in the chronic ailments of children of the character described to undertake the treatment; but being careful to caution the parents or guardian of the child that the treatment must be carried on systematically and for some weeks, and that the case must be examined from time to time and the dose carefully increased if necessary, and its temperature and weight noted, even if it is not convenient to have a blood count made. Nuclein solution cannot be used successfully if it is prescribed offhand and the parents allowed to regulate the treatment without reference to the conditions above named. I am also fully

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convinced that most clinicians who have prescribed this nuclein solution have given it in too small a dose. I found that even young infants could take, with advantage, as much as two teaspoonfuls three times a day, and if a less dose had been given the treatment would not have been successful. I found that young children take the nuclein solution more readily if the proper dose is mixed with a little sweetened water.

SOME CONSIDERATIONS IN THE MANAGEMENT OF PREGNACY.

BY DR. E. E. HARVEY, NORWICH, ONT.

[Extract from paper read before Ontario Medical Association, June, 1897.]

In the class of cases where no results of an old inflammation can be discovered, the pains being neuralgic in character, in women who are anemic or neurasthenic—weak and hypersensitive, where the nervous system is overdeveloped and oversensitive, and the muscular system weak—the treatment varies according to the conditions found. In many, simple anemia is the cause, and the cure the administration of iron and other hematinics. But what I have found of most benefit in these cases is the elixir helonias compound of Parke, Davis & Co.—a mixture of the fluid extracts of helonias, Mitchella repens, viburnum opulus, and caulophyllum. I have had cases in which it acted like a charm. It has not only a distinctly sedative action on the uterus, but also a decidedly tonic effect. Under its administration the pains and soreness gradually disappeared, the uterus becoming strong and healthy, and the patient brighter and more cheerful.

With patients in whose previous labors the uterine contractions were weak, seldom, and inefficient, I have used the helonias compound with splendid results. I have not used this latter in a sufficient number of cases to justify me in asserting that it will invariably have this result, but in all cases in which I have used it the results have been gratifying.—*Canadian Practitioner.*

AN ECONOMICAL PREPARATION OF NUCLEIN FOR ORAL USE EXCLUSIVELY.

Nuclein Solution No. 2 Contains 5 per cent. of Nucleinic Acid from Yeast.

Until quite recently it has been supposed that the therapeutic effect of nuclein could only be obtained when the remedy was used hypodermically. The difficulties and the pain incident to this method of treatment, however, led a number of physicians to the use of the remedy per mouth. More than a year ago we prepared samples of Nuclein Solution No. 2, which we placed in the hands of a number of physicians for trial. *The reports indicate that the full effect of nuclein is obtained from its oral administration.*

Our Nuclein Solution No. 2 is not adapted to hypodermatic administration for the reason that it contains, or may contain, traces of albumen which would cause trouble if injected, but which is perfectly harmless in the stomach. The process of removing the albumen from the Nuclein Solution is laborious and costly. Thus, our motive in seeking to secure a reliable preparation of nuclein for administration by the mouth has not only the sanction of clinical convenience but of financial economy.

We are able to offer our Nuclein Solution No. 2 at about one-fourth the price of the more refined product.

Both are derived from the same source, and by parallel methods; the only difference is in the less perfect elimination of the albumen from the No. 2.

The immediate effect of the administration of nucleinic acid is to *increase the number of leucocytes.* Dr. Hahn, of the University of Munich, stated that by the use of nucleinic acid "it is easy to double the original number of leucocytes in a short time." Von Mayer, of Prague, reports an average increase in the leucocytes of over 75 per cent. following the administration of nuclein.

Nuclein therapy has proved successful in the treatment of scrofula, tuberculosis,

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blood poisoning, and general debility. Reports have been made on its apparent benefit in the treatment of cancer, pneumonia, typhoid fever, anemia, and puerperal fever.

List price, in pint bottles, $2.00 per pint.

PHOSPHATE OF STRYCHNIA DURING THE GESTATION OF DEBILITATED PATIENTS.

BY WALTER BLACKBURN DORSETT, M.D., ST. LOUIS, MO.

After a faithful trial of strychnia in combination with iron or the bitter vegetable tonics, I found it was followed by unsatisfactory results in many cases. It occurred to me that free phosphorus, the well known nerve tonic, would probably, if combined with iron, answer the purpose. In this, however, I was disappointed, and was compelled to abandon its use on account of the derangement of the stomach it almost always produced. The eructations of gases, impregnated with the phosphorus, are another and a serious objection offered by the patient. So I began the use of the chemical union of phosphorus and strychnia, as prepared by Merck; and later, at my request, Parke, Davis & Co., of Detroit, prepared for me the gelatin-coated pill of the phosphate of strychnia, each containing $\frac{1}{100}$ grain.* I have found that this size is the most convenient, as the dose can be increased by directing the patient to double the number in order to get the fiftieth, or take four pills if it is desirable to give the one-twenty-fifth of a grain.

A good appetite and a good assimilation are obtained in the general weakness and debility of the anemic. Constipation is relieved, and in short the patient is built up and placed in a good condition to pass through the ordeal of labor. The uterus contracts promptly after the third stage of labor, and the use of ergot is entirely dispensed with.

*Since the writing of Dr. Dorsett's article, we have added to our list, not a pill, but a chocolate-coated tablet of strychnine phosphate, No. 156, 1-100 grain.—Parke, Davis & Co.

THREE HUNDRED CASES OF DIPHTHERIA TREATED WITH ANTITOXIN IN ROCKFORD, ILL.*

BY DR. P. L. MARKLEY.

Rockford has had a very severe epidemic of diphtheria during the past year. A great many cases of a severe form, and many deaths, have been reported. I had a specially good opportunity during the epidemic to see the results, both with and without the antitoxin treatment, as I was county physician, and as there was no way of getting the remedy when the people were too poor to pay for it, as they frequently were. In thirty cases which I treated without antitoxin, there were seven deaths. Of 300 cases treated with antitoxin, only six deaths were reported. This number comprises all cases treated by sixteen physicians of Rockford, and only includes those cases which received the remedy during the first three days of the disease.

In very few cases was more than 1000 units given. I gave the immunizing dose of 500 units in ten cases with perfect satisfaction every time.

In this report of 300 cases there were three successful cases of tracheotomy performed, antitoxin being given as soon as a diagnosis of diphtheria was made.

I have always given 1000 units at a dose, but I think 2000 would be more efficient and prompt, especially if the disease be at all severe. Young children seem to take a turn for the better more promptly than older ones. One thousand units would be as large dose for a child two years old as 2000 would be for one six years old, other things in the case being equal, of course. In almost all of these cases, as far as I have been able to learn, Parke, Davis & Co.'s Antitoxin was used, showing that their product is perfectly reliable. Very little of foregn make has been given.

I am not in the habit of advertising anybody's remedy, but in so important a matter as this I think it is not out of place to give the results of experience.

*Read before the Central Wisconsin Medical Society, at Madison, Wis., March 29, 1898.

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A CHOICE FIELD FOR BUNGLING MANUFACTURE!

The Two Great Classes of Tablets—One of Dry Chemicals, the Other of Vegetable Extracts —Wherein They Differ—Improved Methods of Production.

We have never hesitated to express frankly to the medical profession our conviction that while tablet medication has its legitimate field of usefulness, this mode of administering medicine may, like any other, be abused. We do not believe in the indiscriminate use of tablets. We do not believe in exhibiting, in tablet form, substances which are injured during the necessary manipulation. We do not believe in irrational and unpharmaceutical combinations. We hold that in dealing with a number of medicinal agents, and with a still larger number of their combinations, the physician does wisely to prescribe the powder, the solution, or even the mechanical mixture. And we emphatically assert that there is no branch of manufacturing pharmacy that is more abominably abused, or that presents choicer opportunities for the clumsy bungler and the spoiling of valuable drugs. No pharmaceutical products require nicer discernment or more delicate skill or, in the producer, a keener sense of obligation to physician, pharmacist, and consumer.

And now a few words about the two principal classes of tablets manufactured by us :

We have achieved the triumph of producing a tablet, made up of insoluble chemicals, which goes to pieces the very instant it touches water! Take one of our tablets of acetanilid, of bismuth, of salol, or of any dry chemical; drop it in a tumbler of water; watch it swell and then crumble into a fine, soft powder—and all in a twinkling! Put a tablet of quinine in your mouth and see how long you can keep it there without expelling it in disgust. Give one of our phenacetine tablets to some headache sufferer, and see how many minutes elapse before relief is produced. Make these simple and easy experiments with the tablets of other manufacturers. You will then bear out the statement that we have progressed in tablet manufacture.

Now, such tablets as the foregoing, made from dry chemicals, are just as efficient as the chemicals themselves. Indeed, they are practically the same thing, for the loose chemical is produced the instant the tablet comes in touch with the fluids of the stomach. But with tablets containing solid extracts, fluid extracts, and the like, the case is very different. In the first place, vegetable drugs are much more readily absorbed by the system when they are presented in solution. In the second place, we consider highly objectionable the heating to which the extracts are usually subjected in the endeavor so to transform them that they may be reduced to powder suitable for compression. Excessive exposure to heat decidedly injures and sometimes ruins the medicinal value of the drug. So far as we know—and we are constantly testing other brands in comparison with our own —we are the only manufacturers who do not resort to a ruinous heating. And it requires resolution to abstain from it. Let us explain.

Instead of taking an extract of Cannabis Indica, for instance, driving out all the moisture, in which is largely contained the active principle Cannabin, and then compressing the dry product into a neat, "handsome" tablet, we retain the moisture and absorb it with a proper diluent powder. Comparing our tablets of Indian Cannabis with others made by the usual process, our tablet seems large and plain, the other small and "elegant." If appearance and not activity be desired, our tablet suffers by the comparison. But take the "nobby" tablet into the stomach. There is little or no action. (Often the tablet is later found intact in the stools.) Then administer one of our larger tablets. The characteristic effects of the Cannabis Indica are soon felt.

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Thus, we have brought both of the two great classes of tablets to a remarkable degree of perfection. We have succeeded in exhibiting dry and insoluble chemicals in the most eligible form ever presented. To the more difficult and perplexing tablets containing vegetable extracts we have succeeded in imparting more medicinal activity than they have ever before possessed. This statement can be readily tested by physical, chemical and clinical experiments. We have suggested a number of simple tests which any one can carry out.

***

Neither in our price list nor in the labels of our tablet bottles do we publish the dose of the remedy, or any other information calculated to foster self-medication or laymen's dabbling in therapeutic measures. We offer our compressed and triturate tablets as a scientific line of pharmaceutical products embodying the results of our earnest and honest effort to furnish medicine in a reliable form. We do not in one breath solicit the physician's specification of our brand, and in the next proclaim from the housetops the means whereby the patient may heal himself.

SIXTEEN "FRIABLE" PILLS SUCCESSFULLY TRAVERSE THE ALIMENTARY CANAL.

BY DR. ALLEN PIERSON, SPENCER, IND.

After reading the article on friable pills in the last issue of the NOTES, I thought it might be of interest to you to hear of an experience I had in the past summer. I had a patient—a lady about 40 years old—who had remittent fever. I gave her quinine in the form of two-grain friable pills. She did not improve, and I increased the dose. On the third day there was a free watery discharge from the bowels. Her husband in removing the vessel had his attention called to something round in its contents, and he fished out and had for my inspection, when I made my visit to the sick woman, sixteen friable pills. Some of them were nearly half worn away, and from that they were in nearly all stages back to those which showed traces of the pink sugar coating.

***

Concerning So-called "Friable" Pills.

[*Western Medical Review*, Nov. 15, 1897, p. 352.]

A certain Eastern firm has been doing some very unique and attractive advertising of friable pills. We recently had some experience with the pills, however, which makes us a little cautious about believing all the advertisers may say. Commencing in the morning, we gave a little fellow during the day eight one-grain quinine pills of the friable variety. No result followed, but the nurse next morning showed six of these which had passed intact through the alimentary canal. The trouble was, the poor little mortal did not carry in his stomach a hammer and a board with which to crack them open. A pill to do good must be covered, if covered at all, with something that the juices of the digestive tract will act upon, and not necessarily that can be crushed between the thumb and finger. The average human being does not carry a hammer in his stomach.

DR. S. SOLIS-COHEN GIVES THE RATIONALE OF INTESTINAL DISINFECTION IN TYPHOID.

After the "calomel stool," intestinal disinfectants may be usefully employed. These may not kill Eberth's bacillus, nor neutralize its toxins, nor chase after it into the spleen or cerebrum; but they do render the patient's intestine a less favorable breeding ground for this organism, and its many named and unnamed congeners; they do diminish the formation and hence the absorption of various named and unnamed toxins; they do render the course of the case less severe. I affirm this unhesitatingly, as the result of a sufficient clinical study.—*Philadelphia Polyclinic*, Dec. 4, 1897.

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A NEW DIGESTIVE AGENT.

BY F. ROBERT BOYD, A.M., M.D., ST. LOUIS, MO.

My attention was attracted toward Taka-Diastase in a practical way during the last session of the Missouri State Medical Association, not by any discussion of it by the members of that Association, but by Mr. Takamine himself, who, in the exhibit-room, was conducting a series of experiments with his product, Taka-Diastase, upon thick solutions of boiled starch. I immediately noticed the wonderful facility with which a few drops of the Liquid Taka-Diastase would convert it into a soluble dextrin, only requiring about five minutes to complete the process. The fact that I had on my hands at this time four cases of stomach trouble which were giving me much anxiety made me take a greater interest, I presume, than I otherwise would have done. I had the good fortune to make the acquaintance of this distinguished Japanese chemist, who I soon learned had some valuable knowledge of the function of digestion not made clear in the physiological text-books; for instance, the statement that 65 or 70 per cent. of all cases of indigestion are due to undigested starch products, which, escaping solution in the mouth, pass on to the stomach, and not being soluble with the albumens, after a time become local irritants like any other foreign substance.

Mr. Jokichi Takamine, Japanese chemist and authority on diastasic ferments.

If this statement be true, it explains why the administration of pepsin and pancreatin so often fails in cases of acute and chronic indigestion. Pepsin under an acid reaction can only attack proteid substances, converting them into peptones, and the pancreatin in an alkaline medium can exert only a very limited influence over starchy substances; hence those starches which escape solution in the ptyalin must remain insoluble, and like other organic substances in the presence of heat and moisture must ferment, bringing on the numerous train of symptoms incident to such action.

Mr. Takamine put into my hands a sufficient quantity of Taka-Diastase to give it a fair trial, and I herewith submit the following report as a result of my experience with it: [Dr. Boyd describes at length (*Therapeutic Gazette*) four cases in which, to put it mildly, Taka-Diastase proved of striking benefit after a number of digestive and other agents had failed most woefully. Our scanty space permits us to quote but one.]

Case 4.—J. Lathrop Boyd, Esq., my own brother, 40 years of age, and prominent in legal circles of the State of Michigan. He has been a sufferer from obstinate stomach trouble since childhood. When a small boy his extreme suffering used to awaken the keenest sympathy and solicitude of the whole family. Everything was done we knew of to relieve him, but with no more than very temporary results. He passed through his boyhood, schooldays, and on up to manhood and professional life with success, but always against the tide. This everlasting pain and burning seemed to hang like an incubus over him. He saw different specialists upon the stomach; none of them could determine anything more than functional difficulty

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as the cause of his trouble, but nothing they did cured him. Four years ago hemorrhoids developed, for which I operated upon him here in St. Louis, and for a time he seemed better, returning home greatly improved. But the arduous duties of an active law practice soon brought him down again, and for the last three years he has suffered very much indeed. Some weeks ago he again came under my personal care, at which time he was taking large quantities of soda bicarbonate and common salt in solution, which he stated was the only thing that would relieve the burning. I immediately stopped these, and for the extreme torpor of the bowels from which he had suffered so long I put him on aloin, belladonna, nux vomica, and cascara tablets, one each evening, and powdered Taka-Diastase three grains while eating three times a day, and in two hours after meals ten grains of a preparation of lactated pepsin.

This plan of treatment has seemed to meet the exigencies of his case in a remarkable manner, and he now promises more toward ultimate recovery than ever before.

I think the great good to be derived from Taka-Diastase will suggest itself to any thoughtful physician who has had experience with these intractable cases; its use will surely open up a better knowledge of the function of digestion.

VALUABLE COMBINATIONS OF SYRUP TRIFOLIUM COMPOUND (PARKE, DAVIS & CO.) WITH OTHER ALTERATIVES.

The following recipes have yielded excellent results in the double rôle of agent and vehicle:

IN EARLY SYPHILIS.

℞ Corrosive sublimate, 1 grain.
Syrup trifolium comp., 8 ounces.
M. Sig.: Teaspoonful t. i. d.

IN GUMMA OR TERTIARY SYPHILIS.

℞ Potassium iodide, 1 ounce.
Water, q. s.

Make saturated solution and take ten drops t. i. d., in teaspoonful of syrup trifolium comp., added to a wineglass of water, increasing the dose as required.

IN SCROFULOUS ERUPTIONS AND IN THE ACNE OF ADOLESCENTS.

℞ Calcium iodide, 16 grains.
Syrup trifolium comp., 8 ounces.
M. Sig.: Teaspoonful to dessertspoonful t. i. d.

IN ULCERS OF FAUCES.

℞ Corrosive sublimate, 1½ grains.
Syrup trifolium comp., 6 ounces.
M. Sig.: Teaspoonful four times daily, reducing frequency of dose if toxic symptoms are developed.

One may alternate with advantage the following formulæ:

IN ANEMIA.

℞ Dialyzed iron, 2 ounces.

Take ten drops in wineglass of water t. i. d., alternating with syr. trif. comp., teaspoonful t. i. d.

IN BUBOES AND SUPPURATING GLANDS.

℞ Calcium sulphide, 16 grains.
Potassium iodide, 1 ounce.
Syrup trifolium comp., 8 ounces.
M. Sig.: Teaspoonful increased to dessertspoonful in tumbler of water t. i. d.

The same formula has been used to advantage in syphilitic tertiary eruptions of the tibia, or may be combined with tonic treatment in the cachexia of scrofula and syphilis.

The intelligence of the physician will suggest such modifications of these formulæ or such additional ones as may be best adapted for the treatment of the cases in hand, bearing in mind the fact that there is scarcely a condition requiring alterative treatment in which Syrup Trifolium Compound, alone or combined with other agents, may not be used to advantage.

A glance at the subjoined formula will make plain why Syrup Trifolium Compound, as introduced and manufactured by us, is superior in efficacy to the current combinations of alteratives. Each fluidounce contains the active constituents of:

Red clover blossoms, 32 grains.
Lappa, 16 grains.
Berberis aquifolium, 16 grains.
Xanthoxylum, 4 grains.
Stillingia, 16 grains.
Phytolacca root, 16 grains.
Cascara amarga, 16 grains.
Potassium iodide, 8 grains.

Dose, two teaspoonfuls three times a

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day, gradually increased, if need be, to a tablespoonful.

***

While we very cheerfully supply samples and literature on request, and invite the most searching tests to which our Syrup Trifolium Compound can be subjected, we cannot forbear asserting that the efficacy of our product has been too often and too long established to admit of any question. It is a fine preparation, with a wide range of usefulness. We vouch for its fidelity to formula and label, and for the unassailable quality of its ingredients.

A YEAR'S EXPERIENCE IN THE TREATMENT OF LARYNGEAL DIPHTHERIA WITH ANTITOXIN AND INTUBATION.*

BY CHARLES GODWIN JENNINGS, M.D.,

Second Vice-President of the American Pediatric Society; Professor Practise of Medicine and Clinical Diseases of Children, Detroit College of Medicine.

A year ago a few cases of laryngeal diphtheria treated with antitoxin and intubation were presented to the Society, with a *résumé* of the experience of other operators, showing the remarkable change in the mortality rate of this disease that came with the introduction of antitoxin. Since then laryngeal diphtheria has prevailed to an unprecedented extent in the city and neighboring towns, giving abundant opportunity to add to the evidence bearing on the value of the serum treatment. The total number of cases treated by antitoxin or intubation, or both, was forty-three, six of which died. The number treated by antitoxin without operation was eight, all of which recovered. The number of cases operated upon was thirty-five, with six deaths.

Eliminating these four moribund cases, the results would be: Thirty-nine cases with two deaths; thirty-one intubations, with but two deaths. Such results need no comment for those who are acquainted with the fatality of diphtheria in pre-antitoxin days. Of these 43 cases, only fourteen received the antitoxin before they were seen in consultation. Uncertainty of diagnosis and fear of the untoward action of the remedy are the chief causes of hesitancy in its use; this fear the extensive use of the serum is rapidly dispelling.

Except in the first two cases, Parke, Davis & Co's. Antitoxin was used.

The maximum dose should be given. Such is my experience and that of Dr. B. R. Shurly; and if given early it will in many cases obviate the necessity of operation.

When in doubt, use a large dose; and in every case of doubt, use antitoxin, and settle the question of diagnosis afterward.

*Read before the Detroit Medical and Library Association. Abstracted from *Medical Age*, Feb. 25, 1898.

GIVE SMALL DOSES AT SHORT INTERVALS.

This is Almost Indispensable to the Successful Use of the Hypophosphites.

Such an admonition has often been repeated by medical writers in America and in foreign countries, when dilating upon the unmistakable benefit rendered by a systematic use of the hypophosphites. Full doses are rarely as suitable or profitable as are minute doses frequently repeated, in the treatment of anemia, tuberculosis, bronchitis, malignant cachexia, or for the correction of depraved nutrition, malassimilation, and nervous debility.

A permanently clear syrup, free from any tendency to deposit the unsightly precipitate which forms a blemish upon many of the current preparations of the hypophosphites, is our standard "Syrup Hematic Hypophosphites." The dose is one to two fluidrachms.

Our "Hematic Hypophosphites" forms no exception to our rule to publish every formula. Each fluidounce, as stated on the label, contains:

Potassium hypophosphite, 1½ grains.
Manganese hypophosphite, 1 grain.
Strychnine hypophosphite, ⅛ grain.
Ferrous hypophosphite, 1¼ grains.
Calcium hypophosphite, 1 grain.
Quinine hypophosphite, 7-16 grain.

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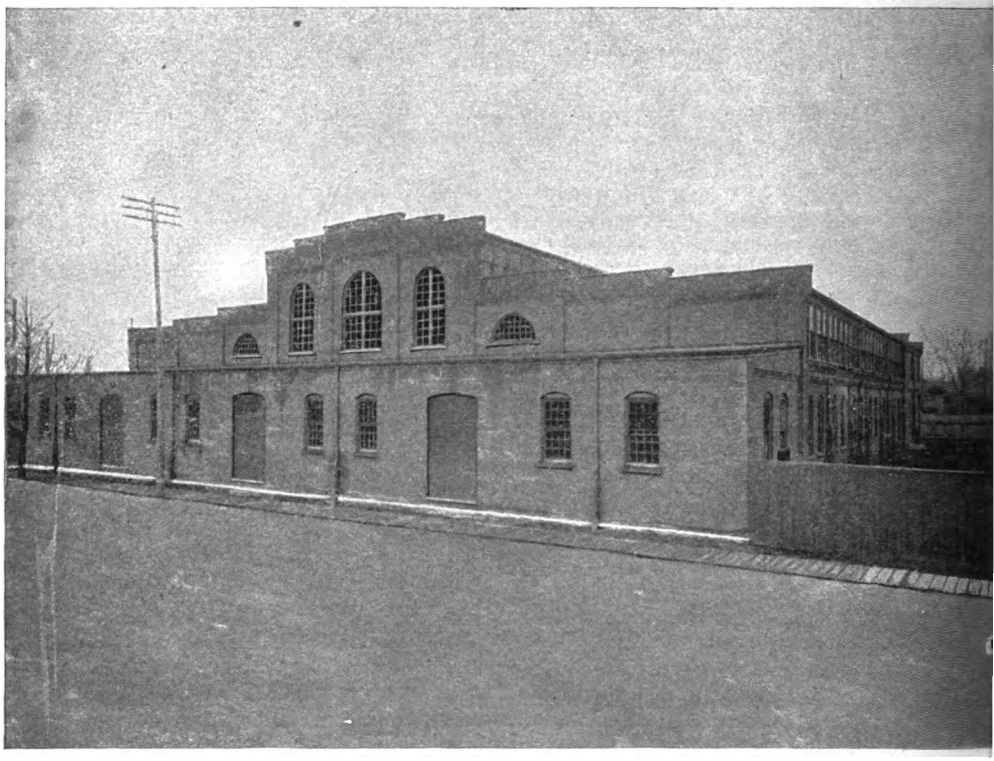
THE TWIN STABLES OF OU



The second structure (on the right) is a recent acquisition. The two buildings a

THE TREATMENT OF AMYLACEOUS DYSPEPSIA.

[Abstract of article in *American Practitioner and News* by Walter P. Ellis, M.D., Livermore, Ky.]

Three cases are cited which came under the author's observation. Case 1 is an example of those which, previously to the introduction of Taka-Diastase, the physician too frequently found himself unable to cope with. Cases 2 and 3 represent that class which are often considered the most intractable of all, but yield promptly under Taka-Diastase and are cured in a short time.

Case 1.—L. A——, male, aged 38; occupation, barber. In the fall of 1894, and for several years before, he had been the victim of a most intractable form of dyspepsia. He became greatly emaciated, weak, and nervous; his stomach retained only the blandest articles of diet and in small quantities. His condition improved somewhat under treatment, but it became evident that other measures must be resorted to. Extract of malt was given with some good effect, but recovery ceased at a certain point. Attention being attracted to Taka-Diastase, it was at once procured. The patient was given capsules containing five grains each, to be taken immediately after eating. Improvement was soon observed, and recovery was from that time rapid and continuous.

Case 2.—Mrs. J. H——, aged 46; wife of a prosperous farmer. Until within two

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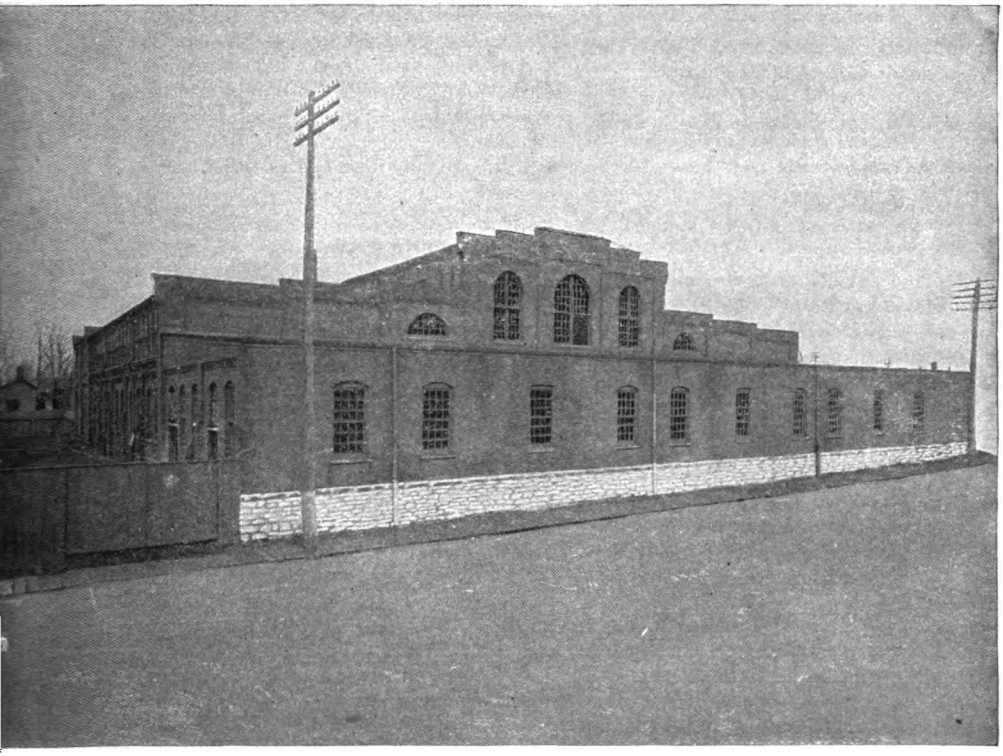
BIOLOGICAL DEPARTMENT.



exact counterparts, and, with their courts and paddocks, occupy an entire square.

years she had been in excellent health, and was inclined to stoutness. During this time dyspepsia had so troubled her that she suffered intensely from everything she ate. Ordinary remedies proved of no avail. Her case was diagnosed as amylaceous dyspepsia, and she was given Taka-Diastase in eight-grain doses, one-half to be taken before and the rest during or after eating. She was given at the same time a digestive tonic. The improvement was prompt and continuous. She now eats three meals a day and suffers no inconvenience.

Case 3.—W——, male, aged 40. Digestion had been very good until four weeks previous. He was then seized with an acute gastralgia, the result of eating quite heartily of watermelon, and from that time had more or less recurrence of the trouble; even a small quantity of starchy food especially gave rise to the most distressing symptoms. The diagnosis of amylaceous dyspepsia was also made, and he was put upon Taka-Diastase at once, in doses of five grains, taken with the meals, and starchy food excluded from his diet as much as possible. Improvement under this treatment was satisfactory and uninterrupted.

The indigent cases, ten children and the mother, all did nicely in a room 8x10 without any other treatment than P., D. & Co.'s antitoxin.— J. C. STEVER, M.D., Three Springs, Pa.

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RECENT ADDITIONS TO OUR LIST OF ELIXIRS.

Useful Combinations Unprotected by Trademark, Copyright, or Patent.

ELIXIR ALOIN, BELLADONNA AND STRYCHNINE COMPOUND, NO. 125.

Each fluidounce contains:
Aloin, 1 grain.
Podophyllum resin, 1 grain.
Fl. ext. belladonna leaves, 5 minims.
Strychnine sulphate, 1-10 grain.

Pills and tablets of aloin, strychnine and belladonna have long been in general use, but many physicians will prefer to prescribe this standard combination in the form of a palatable elixir *containing the full proportions of active ingredients.*

ELIXIR ALETRIS COMPOUND, NO. 126.

Each fluidounce represents:
Star-grass, 30 grains.
Caulophyllum, 15 grains.
Viburnum Opulus, 15 grains.
Helonias, 30 grains.
Squaw-vine, 30 grains.

Dose, 1 to 2 fluidrachms (4 to 8 Cc.).

A valuable combination indicated in those functional troubles of women which require a general tonic of the uterine system. It is especially applicable in dysmenorrhea, amenorrhea, menorrhagia, and leucorrhea. The dose is one to two teaspoonfuls.

Combined with our physiologically tested Fluid Extract of Ergot, it is oftentimes of the greatest benefit. By reason of its direct tonic action on the uterus, it can be advantageously given in teaspoonful doses every hour or two after parturition.

ELIXIR BROMIDE COMPOUND, NO. 127.

Each fluidounce represents:
Chloral, 120 grains.
Potassium bromide, 120 grains.
Extract Indian cannabis, 1 grain.
Extract hyoscyamus, 1 grain.

Dose, ½ to 1 fluidrachm (2 to 4 Cc.) in water or syrup as required.

This combination is indicated when sleeplessness is dependent upon exhaustion rather than to primary excitement of the brain. Thus it has been found of value in the sleeplessness following overwork or severe pain or associated with acute mania. The pain of neuralgia, whether of central or peripheral origin, toothache, lead colic, etc., will be relieved by this Elixir. As it does not retard the normal secretions, it can often be used when opium or morphine would be followed by serious complications.

Specimens of these elixirs will be sent for trial.

INDIGESTIBLE MASSES OF GUM AND MUCILAGE.

Growing Unpopularity of the Ordinary Emulsions of Cod-liver Oil.

No reader of current medical literature can long fail to observe the dissatisfaction frequently expressed by physicians with the every-day emulsions in which Irish moss or gum arabic is used as the emulsifying vehicle. This mucilaginous matter clogs the digestive organs and actually impedes the proper assimilation of the nutrient oil. It cannot be denied that much of the ill-grounded unbelief in cod-liver oil as a valuable reconstructive food may be attributed to the faulty, indigestible emulsions.

For years past pharmacists have known the great advantages of egg emulsions, but the perplexing question was how to prevent their spoiling.

That question is fully answered by our Egg Emulsion of Cod-Liver Oil (Hewitt's Formula). This is a positively stable, permanent product, with no other emulsifying agent than eggs. We guarantee the presence of 40 per cent. oil. The only flavoring is a fine quality of brandy. The emulsification is perfect, the oil being minutely divided. Every ingredient is a food. Moreover, our Egg Emulsion is miscible with water, milk, wine, etc., thus affording a pleasing variety of flavors.

Drop us a postal card, asking for a sample.

We offer our Nuclein Solution No. 2, *for oral use exclusively*, at about one-quarter the price of our No. 1. See page 4.

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & CO.]

EDITORIAL.

C. A. HERTER, M.D. (*Cleveland Journal of Medicine*, October, 1897), writing of the action of diastase holds that in reducing the carbohydrate ration of certain dyspeptics we do good by reducing an acid intoxication of intestinal origin. The value of diastase, and especially Taka-Diastase, for those who do not utilize the starches depends upon the rapid conversion of insoluble carbohydrates into a soluble form, and their absorption before fermentation becomes advanced.

IN PEDIATRIC PRACTISE.—It will be found that if cod-liver oil does not seem to agree with a child who requires this agent, some liquid pancreatin may well be administered at the time it is taken. Within a short time the child will not only desire the oil, but will actually "cry for it." The remedy is by no means so disagreeable to children as it is to adults, and the former seem to develop speedily a taste for the oil. This applies with particular force to our Egg Emulsion of Cod-liver Oil.

IN AN article on "Heart Murmurs," read before the Mitchell District Medical Society of Indiana (December, 1897), Dr. Simon P. Scherer declares that the prolonged use of strophanthus shows no tendency to cumulative effects. The tincture in five to eight minim doses gives the most uniform results in a tonic stenosis. Dr. Scherer called attention also to the aggravated dangers of cardiac medication in all forms of hypertrophy complicated with renal disease.

In the choice of preparations of strophanthus, Dr. Scherer likes the tincture made by Parke, Davis & Co., as the most reliable, and therefore the best, preparation. He does not think the dose should exceed five minims to begin with.—*Journal of the American Medical Association.*

SEVENTEEN HUNDRED AND FIFTY UNITS PER Cc.!

The Astonishing Potency of Our Latest Serum-Product.

The remarkable power of the antitoxin which constitutes our latest achievement in serum-production can be better conveyed in the statement that each cubic centimeter is capable, theoretically, of preserving 175,000 guinea-pigs from the minimum fatal dose of diphtheria toxin! "But," our visitors ask us, "how can you administer one cubic centimeter to 175,000 animals?" By simply diluting the serum in sterile saline solution and administering to each pig a calculated dose of the dilution.

We are now ready to supply this most potent serum at no advance in price. Each vial contains 1 Cc. (1750 units). Orders must specify "1750 unit serum," else we shall supply our "special" antitoxin, which tests 750 units per cubic centimeter, or our "regular" serum averaging 200 to 300 units per cubic centimeter.

In the past few months we have produced several parcels of antitoxin which, in response to searching and repeated tests, exhibited a potency of two thousand (2000) units per cubic centimeter. But we have purposely refrained from advertising flourishes and proclamations, on the ground that our supply of 2000 unit serum, though possessing great scientific interest, was not equal in quantity to the commercial demand. We do, however, feel perfectly warranted in stating that

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the production of highly concentrated serums is receiving our energetic study, and that our present results give promise of serums possessing a concentrated potency that, only a year ago, would have been deemed impossible of achievement for years to come.

***

Professor Novy's Report on Our 1750 Unit Serum.

UNIVERSITY OF MICHIGAN,
ANN ARBOR, March 25, 1898.

Parke, Davis & Co., Detroit, Mich.:

GENTLEMEN—I take pleasure in stating that the specimen of diphtheria antitoxin recently submitted to me for examination contains not less than 1750 immunity units per cubic centimeter.

Respectfully,
F. G. NOVY.

MEDICAL GYNECOLOGY SHOULD NOT YIELD WHOLLY TO THE KNIFE.

It is far from our purpose to belittle the brilliant work performed by a number of our foremost surgical gynecologists, but, with all due modesty, we may be permitted to contend that here, as in other domains of the healing art, the measure of a man's ability is often his knowledge when *not* to operate. Conceding that many uterine and ovarian troubles can be remedied only by mechanical means or surgical intervention, the majority, not being sufficiently grave to require operative treatment, are fit subjects for judicious medication. Among these may be classed the many cases of dysmenorrhea and ovarian hyperesthesia, for the relief of which the sufferers resort periodically to alcohol, the narcotics, or some of the much-vaunted nostrums of the market.

It is a mistake to suppose that substantial and lasting benefit cannot be obtained for such cases from drugs alone. A number of vegetable agents have been thoroughly tried, with results often satisfactory, sometimes brilliant.

Viburnum prunifolium, for example, is a most complete utero-ovarian tonic and sedative, and appears to exert a specific action with tendency to regulate function. These are attributes that are combined in no other single drug.

Hydrastis canadensis is tonic and sedative to mucous tissue, and likewise to striated fiber.

Jamaica dogwood is a powerful sedative, manifesting its virtue chiefly in the ovarian tract with reflex tendency to the uterus. Moreover, it is a general analgesic, antispasmodic, and carminative.

A very palatable combination of these three remedies is afforded by our Liquor Sedans, each fluidounce of which represents 60 grains of the Black Haw, 60 grains of the Golden-seal, and 30 grains of the Jamaica Dogwood.

We beg leave to state emphatically that Liquor Sedans long ago emerged from the experimental stage. It has been tested by a host of physicians. *It is an established success.* Its virtues are indubitable. And in a very large class of cases of dysmenorrhea, ovarian irritability, and irregularity of the utero-ovarian function, it will prove a grateful aid to the physician and a boon to the sufferer.

Write us for samples and literature.

OUR PRICE LIST FOR 1898.

We have issued a catalogue for 1898 especially designed for the convenience of the medical profession. Besides our regular price list, it contains useful tables of equivalents, tables for the extemporaneous preparation of solutions of various strengths, tables showing the relation between imperial and wine measure, and a property and dose list of all drugs from which we manufacture either a fluid, powdered or solid extract, or a concentration.

By the first of May a copy of this catalogue ought to be in the hands of every physician in the United States. Our mailing lists, however, may not be absolutely complete, or our mailing clerks may inadvertently overlook some physician. We therefore urge every doctor who has not received a copy to write us for one, and it will be sent forthwith postpaid.

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A PRE-ANTITOXIN MORTALITY OF 40 PER CENT. REDUCED TO 3.6 PER CENT.

Prior to the introduction of Antidiphtheritic Serum, the mortality from diphtheria at Harper Hospital, Detroit, averaged for a number of years 40 per cent. According to the thirty-fourth annual report of the hospital authorities, as published in the February number of the *Harper Hospital Bulletin*, page 73, 141 cases were treated at the hospital during 1897, with the following results:

	Cases.	Deaths.
Ordinary diphtheria	115	1
Laryngeal diphtheria	26	6
	141	7
Excluding two cases moribund on admission	2	2
	139	5

Mortality under antitoxin treatment, 3.6 per cent.

The antitoxin employed exclusively in Harper Hospital during 1897 was the Antidiphtheritic Serum of Parke, Davis & Co.'s Biological Department, and the remarkable reduction displayed in the death-rate reflects the highest credit on the efficacy of this matchless product.

LAUDER BRUNTON'S SIGNIFICANT REMARK ABOUT ERGOT.

The following passage occurs in "Lectures on the Action of Medicine," by T. Lauder Brunton, 1897:

"As a rule one does not give ergot until just towards the end of labor, in order to cause firm contraction of the uterus after the labor is over, so that there shall be no bleeding into the uterine cavity. It is generally given now in the form of the hypodermatic injection, and, instead of injecting it under the skin, it is usually injected deep into the substance of the gluteal muscle, because when used in this way it does not tend to give rise to abscesses nearly so much as when injected under the skin."

If the obstetric practitioner desires to guard against the formation of those abscesses which, in the past, have detracted so greatly from the usefulness of ergot, and which are sometimes followed by gangrenous sloughing, he can do nothing more judicious than accept our positive and emphatic assurance that our "Ergot Aseptic, for Hypodermatic Use" will exert the important physiological properties of the drug, without producing its deleterious after-effects.

Prof. W. P. Manton, who occupies the chair of Clinical Gynecology in the Detroit College of Medicine, has subjected our Ergot Aseptic to searching clinical experiment. The following expresses his opinion of it—an opinion shared by a score of other gynecologists who have thoroughly tested the new product: "To facilitate uterine contraction in every instance, it is a good routine practise to administer a drachm of fluid extract or normal liquid ergot immediately following the delivery of the placenta. If the parturient is completely anesthetized, as after operative procedures, or where the immediate action of the drug is urgently demanded, hypodermatic injection should be resorted to. Formerly the Bonjean preparation was much employed for this purpose, but within the past two years a much better and more reliable article has been introduced. The Ergot Aseptic (Parke, Davis & Co.) comes put up in small bulbs, each containing the proper dose for a single administration, so that all the physician has to do is to break off the neck of the receptacle and draw its contents into the syringe. I have given this preparation a most careful and thorough testing, and find that it is satisfactory in every respect. One great advantage is that it is absolutely aseptic, never of itself giving rise to irritation or abscess formation in the tissues; and it is very rapid and powerful in its effects, producing strong uterine contractions within a surprisingly short time."

The important advantages peculiar to our new preparation may be summarized as follows:

1. Absence of extractive matter (which, being unabsorbed, acts as an irritant and produces abscess).

2. Complete freedom from ergotinic acid, a substance which, when hypoder-

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matically administered, acts as a paralyzant on the nerve-centers and, being with difficulty absorbed, becomes a cause of irritation and frequent abscess.

3. Every parcel is physiologically tested and standardized.

4. Hermetically sealed glass bulbs exclude all germs or other contaminating substances.

5. Freedom from both acid and alkali.

6. Entire absence of alcohol, glycerin, salicylic acid, carbolic acid, or other preservative which might prove irritating.

7. Concentration: each bulb contains one cubic centimeter, representing two grammes of standard Ergot.

8. Every bulb is sterilized, and the total absence of bacteria is evidenced by the fluid remaining limpid.

9. Ergot Aseptic (P., D. & Co.) is perfectly stable and permanent.

The finished package containing six bulbs is durable and compact, and can be conveniently carried.

To meet emergencies, every practitioner doing obstetric work should have always within reach a package of these ergot bulbs.

"HIC LOCUS EST, UBI MORS GAUDET SUCCURRERE VITAE." *

Last September our Biological Department had the honor of opening wide its doors to the inspection of a distinguished delegation from Indianapolis. The visiting party included Prof. Theodore Potter, who occupies the Chair of Bacteriology in Indiana Medical College; Dr. E. D. Clark, City Sanitarian; Dr. J. N. Hurty, Secretary State Board of Health, and Dr. H. G. Gaylord. In the February number of the *Indiana Medical Journal*, Professor Potter describes the visit, the magnitude and quality of the equipment which greeted him, the bacteriological methods pursued, and his general impressions. "Altogether," he states, "our visit to this laboratory made a most favorable impression, both as to the genuineness and reliability of its products, and the sincerity and scientific attainments of those who have it in charge. The best cure for the 'antitoxin disease' [*i.e.*, ungrounded prejudice against the remedy] is a visit to such a laboratory, over the entrance to which might well be inscribed the legend of the old Ohio Medical College dissecting-room: 'Hic locus est, ubi mors gaudet succurrere vitæ.'"

The privilege of which Professor Potter writes so eloquently and appreciatively is not withheld from any practitioner or student. Every professional man is welcome to inspect our work. Our doors are ever open. We have no secrets. We invite visits, questions, correspondence. No visitor is repelled. A cordial welcome awaits every one. We are proud of our work and our products, and we are only too happy to exhibit them.

* "This is a place where Death rejoices to aid Life."

TREATMENT OF SEPTICEMIA.

Dr. Walter Courtney (*Medical News*) has tried nuclein in the treatment of patients suffering from septicemia, and the results, as shown in ten cases, were very satisfactory, only one proving fatal. He sums up his experience thus: (1) The yeast nucleinic acid should be given as soon as septic infection is suspected. Do not wait for the typical, classical symptoms as given by text-books. If delay occurs until all the symptoms of the disease are added to an abnormal increase in temperature and pulse-rate, a serious waste of most valuable time must occur. (2) The nuclein should always, in septicemia at least, be given hypodermatically if possible, in order to secure prompt action. If the one-per-cent. solution is used, at least from thirty to forty minims, undiluted, may be given every three or four hours.

As made from the *green* berries, our Fluid Extract of Saw Palmetto possesses all the virtues of ordinary fluid extracts of this drug, and, in addition, a considerable portion of the green oil, which is held to be an important constituent.

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RECOMMENDED BY MEXICAN INVESTIGATORS.

In White Zapote (Casimiroa edulis *La Lav.* et *Lex.*) we seem to have a new remedy possessing hypnotic, analgesic, antispasmodic and antithermic properties. It has been used in the hospitals of the City of Mexico in the treatment of insomnia from all causes, and is especially recommended in the treatment of the violently insane. It induces a quiet sleep of several hours shortly after administration. The dose is two to ten minims of the fluid extract. The habitat of white zapote is Mexico. The seeds only are employed.

Zapote has been used in the Hospital San Andres with very good results in cases of insomnia from alcoholic excess. Its virtues may be summed up as follows:

1. Its action is the same as that of other hypnotics in cases of insomnia from cerebral excitement or by those of alcoholic drinks.

2. The sleep produced by it is quiet and refreshing, similar to the natural.

3. It causes no nightmares, nausea or disagreeable conditions upon awakening, nor the slight cephalalgia caused by some of the other hypnotics.

4. No physiological effects occur when continued for many days in doses of forty to sixty centigrams.

Literature sent on request.

COSTS MORE PER POUND, BUT LEAST PER DOSE!

There are fifteen or twenty preparations on the market termed by courtesy Fluid Extract of Cascara Sagrada.

The dose fluctuates between the widely distant limits of fifteen drops and four drachms.

The prices range from 59 cents to $2.25 per pound.

In bicycle parlance, there is a charming abundance of "options"—the prescriber can choose to his heart's content; but what a chaos of qualities—what uncertainty in the matter of curative results—what a chance for expensive economies!

In short, much of the alleged fluid extract cascara sagrada on the market is utterly unworthy of the name; is deficient in activity; is made from spurious or ill-seasoned varieties of Rhamnus; and, dose for dose, is much more expensive than a standard product at a standard price.

Dose for dose, our Fluid Extract Cascara Sagrada is the cheapest, because it is the best and most active. We need not expatiate on its quality. We do not need to. Everybody knows and will admit that the reputation Cascara to-day possesses was acquired with our fluid extract. But what we particularly want to enforce is the fact that our fluid extract is the cheapest for that prolonged administration which can alone cure constipation.

We believe in the old bitter fluid extract. The bitter tonic principle plays an essential part in the cure and should not be tampered with. But we realize that to some patients the bitter taste is insufferable, and for this class of consumers we market our Fluid Cascara Sagrada Aromatic, so manipulating the drug that only a portion of the bitter principle is removed—just enough to render possible a skilful disguise of the bitter taste.

We introduced Cascara Sagrada and we are to-day taking the same pains with our various preparations as when the drug had its reputation yet to make.

FIGURES THAT TELL THEIR OWN STORY.

In a recent price list issued by one of the most reliable and reputable dealers in essential oils, santal or sandalwood oil is listed at prices ranging from $1.75 to $9 per pound! What a hopeless and chaotic condition of the market in respect to quality!

It was just this prevalence of cheap, inferior and adulterated santal oils, and the general uncertainty of quality, that drove us to distilling our own product. We were bound to have an unquestionably pure oil for our preparations.

We have recently added five-minim globules of our own pure oil to our price list. These are put up in bottles of fifty each.

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REPORTS.

Fifteen Cases of Typhoid Without a Death.

I have treated fifteen cases of typhoid fever by the Woodbridge Method without a single death.—DR. GEO. L. IRELAND, Winslow, Ind.

Euthymol in Dental Practise.

I have used your Euthymol myself, and also in my practise, and find it comes up fully to what you claim for it.—F. C. WILLIAMS, D.D.S., Cavannah, Tenn.

The Laryngeal Type Prevailing.

Dr. W. Rockwell, River Herbert, N. S., states: "I have attended quite a number of cases of diphtheria this winter, principally of the laryngeal type, and have used the Antidiphtheritic Serum of Parke, Davis & Co. with good results."

Pain in Gastric Carcinoma.

I saw Chlor-Anodyne given in a case of carcinoma of the stomach, in the Philadelphia Polyclinic, for the purpose of relieving the distressing pain, and the effect was all that could be desired. The pains were entirely relieved.—F. H. WILLIAMS, M.D., Portsmouth, O.

Diuretic and Stimulant to the Prostate.

I have used various proprietary preparations seeking relief in my own case, being on the verge of uremic poisoning. Elixir Saw Palmetto and Santal Compound (P., D. & Co.) has afforded me most remarkable results. — JOSEPH H. DAVIS, M.D., Axalia, Ind.

Twelve Cases of Diphtheria.

Your antitoxin I have injected in twelve cases or more, and the results are a success. I have reported to Marine Hospital Service at Washington. Your antitoxin came to me from my friend Dr. Martin Caraballo, who told me he was yesterday asking for more.— MANUEL R. MORENO, M.D., West Tampa City, Dec. 31, 1897.

Twenty Cases; No Deaths.

I have treated twenty cases of typhoid by the antiseptic method, employing Dr. Woodbridge's method in the main, and there have been no deaths so far. The average duration of treatment has been about two weeks. — BOARDMAN REED, M.D., Atlantic City, N.J.

Cascara Sagrada.

I have had considerable experience with Cascara Sagrada. Whenever I obtained your preparation I have not been disappointed in its therapeutic effects. It must be your manner of manipulation and preparation that makes the difference. I find your fluid extract reliable and uniform in strength.—THOS. H. CURRIE, M.D., Lebanon, N. H.

Antitoxin in Fifty Cases.

Having used your Diphtheria Antitoxin during the past year in upwards of fifty cases through a severe epidemic, I can heartily bear testimony to its reliability and to the excellent results which I have had from its use in every case. Your hermetically-sealed bulb I consider superior to any other container in the market. —WM. CARR, M.D., Parkhill, Ont.

Ninety-Seven Severe Cases.

I have used antitoxin in ninety-seven bad cases in private practise, with no evidence of shock or other untoward symptom. Nine cases died, all of them being injected after the fifth day, five of the nine cases dying in six to twenty-four hours. All cases injected before the fifth day recovered.—GEORGE MACCOY, M.D., Secretary of the City Board of Health, Columbus, Ind.

For Painful Neuralgia.

If there is one of Parke, Davis & Co.'s preparations above another which has been signally successful in my hands, it is their gelatin-coated neuralgic pills (Brown-Sequard). I have never found anything to equal it in painful attacks of the fifth

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nerve. . . . Parke, Davis & Co.'s pepsin has proved a boon in my work, acting like a charm. — R. J. KEMBALL, M.D., Buffalo, N. Y.

Serum-Treated Tetanus.

My first experience with the Antitetanic Serum occurred recently in a very severe case, the symptoms of tetanus developing about twelve days after the injury. I used altogether ten doses of from twelve to seventeen cubic centimeters. The improvement was marked after the second dose. My patient is now able to sit up, help himself considerably, and eat without assistance. — J. P. BAKER, M.D., Findlay, Ohio.

Diphtheria — Thirty-nine Cases Without a Death.

I have now treated thirty-nine cases of diphtheria with your Antitoxin and without a death. At present I am treating two which are recovering. In each case I have established my diagnosis by a microscopical culture. I am convinced that I should have lost at least ten of my cases, if not more, had it not been for the Antitoxin. — N. E. WOESSNER, M.D., Huron, Ohio.

In Morphine Idiosyncrasy.

Was called recently to attend Mrs. P——, an elderly lady, suffering from a most intense exacerbation of a chronic malignant disease of the liver. Morphine alone or combined invariably produces such vomiting, headache, etc., that she will permit it to be used only when suffering excruciating agony. Chlor-Anodyne relieved her quickly and nicely. There were no bad after-effects.—STANLEY M. WARD, M.D., Hampton, N. H.

Prejudice Vanquished by Experience—Eighteen Cases of Diphtheria—No Deaths.

From the first I have been prejudiced against the use of antitoxin in the treatment of diphtheria, but having employed Antidiphtheritic Serum (Parke, Davis & Co.) in eighteen cases in conjunction with Loeffler's Solution for local application, I have had the best results, not losing a case. Under any other treatment I should have expected a mortality of not less than four cases. — FRANK BROUWER, M.D., Lakehurst, N. J.

The Reliable Character of Our Culture Media.

In five hundred tubes shipped me for the diphtheria culture test I have found less than one-half per cent. to be contaminated and unfit for use.

The exactness with which the medium is prepared aud the material employed render it possible to make diagnoses of diphtheria six hours after the specimen is taken. This statement is unsolicited, but is due you. — L. PARK DRAYER, City Sanitarian, Fort Wayne, Ind.

Severe Dyspepsia of Twenty Years' Duration Promptly Relieved.

I have myself been troubled with dyspepsia—stomachic and intestinal indigestion—for twenty years. I had quit trying any remedies until in a fit of desperation I tried your Taka-Diastase. The relief was magical. I am very sure I should not have believed anyone who had told me such would be the case. In suitable cases I have found your Essence of Pepsin as satisfactory, and giving prompt and efficient relief. — M. HOLLADAY, B.S., M.D., Sidney, Va.

Chronic Duodenal Dyspepsia with Normal Gastric Digestion.

Dr. James MacFie, Avon Park, Fla., writes us: "In one case especially, that of an elderly man, a sufferer for years from dyspepsia, a few dozen capsules of Taka-Diastase were given. Within two days he was free from pain, and before all the capsules were taken he was a 'new man.' That the effects are lasting is shown by the fact that more than a year has elapsed with no return of the trouble. I feel that it is simple justice to testify to the grand results given by Taka-Diastase in dyspepsia, and especially in the amylaceous form of that distressing malady."

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GLEANINGS.

It should be borne in mind that curative serums must be kept at a *uniform*, and preferably at a moderately low, temperature, carefully protected from all fluctuations of both heat and cold.

Prof. Edward Divers, of Tokyo University, mentions in the *Chemical News* that Mr. Takamine, F.C.S., the inventor of Taka-Diastase, was "the first Japanese pupil he ever had, and pursued chemistry under him for four years."

Dr. Tennant has demonstrated before his class in the chemical laboratories of the Denver Homeopathic College that Taka-Diastase will do just what is claimed for it by the manufacturers (Parke, Davis & Co.), converting starch into sugar in ten minutes. — *The Critique*, Oct. 15, 1897, p. 37.

An Indispensable Member of Our Staff.— I am pleased that your careful and wise business methods have induced you for the public's good to engage a competent V. S. as purchasing and examining veterinarian to your Antitoxin plant. — J. A. McDonnell, M.D., 1002 Masonic Temple, Chicago, Ill.

If drug manufacturers offer their wares directly to the public and thus rob us of our exclusive right to prescribe, let us place them where they belong — in the class of nostrum venders, whom the profession cannot recognize. — *American Gynecological and Obstetrical Journal*, November, 1897.

The employment of this most valuable remedy (Cannabis Indica) is handicapped by its frequent lack of power — a fault which is largely dependent upon its preparation. The drug as prepared by Parke, Davis & Co. has proved efficacious in the author's hands for a number of years. The physician should always employ some preparation known by him to be active by personal trial before condemning the drug as a failure in a given case. — HARE'S "Practical Therapeutics," 6th ed.

The Pharmacopoeia is singularly poor in vegetable alteratives, and any well tested addition to our materia medica in this class of remedies will, we are sure, be gladly welcomed by practitioners. We have used Syr. Trifolium Comp. with decidedly satisfactory results in some cases of chronic skin diseases of suspected specific origin. Being very palatable, children take it readily, and we have found it exceedingly useful, when combined with small doses of perchloride of mercury, in treating congenital syphilis. — *Hospital Gazette* (Eng.).

Any practitioner who studies the collective investigation reports for 1896 and 1897 on antitoxin for diphtheria and croup in private practise, issued by the American Pediatric Society, and fails to use antitoxin because he "does not believe in it," should not be entrusted with the management of a case of diphtheria, and the practitioner who thinks a case is mild, and waits for severe symptoms before using antitoxin, utterly fails to grasp the situation, and will frequently be disappointed. — DR. AUGUSTUS CAILLE, in *Post-Graduate*.

The Use of Warburg's Tincture in Malaria.*—Warburg's Tincture should always be given, as recommended by the experienced practitioners in India, after a brisk purge, undiluted, in doses of half ounce, all drinks withheld, repeated in three hours, and the patient carefully rolled up in blankets to encourage the profuse aromatic perspiration which follows. It is one of the most powerful diaphoretics known; it is also a diuretic, a stimulant, and a purgative. I always follow its use by opium, and small doses of whiskey—at least never omit the opium, which I believe acts most happily. Recently I have used the powdered Warburg's Tincture put up in elastic capsules, by Messrs. Parke, Davis & Co., an elegant preparation, far more agreeable to the patient than the liquid.

---

* J. G. VanMarter, Jr., M.D., of Savannah, Ga., in paper read before Clinical Society of St. James Dispensary.

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BRITTLE CAPSULES are exceedingly expensive to handle -- ofttimes more are broken than used. Caps and bodies that do not fit perfectly are a source of annoyance and loss, and not only loss of capsule, but also loss of drug. Capsules that are liable to soften during warm weather, that are slightly odoriferous, and ill-tasting, are certainly expensive at any price.

Parke, Davis & Co.'s Empty Gelatin Capsules Are the Best.

They are pliable—not brittle – and perfectly soluble. Caps and bodies fit, no waste of capsules, no waste of drug. No softening during warm weather, no disagreeable smell, no obnoxious taste, no air-holes, no discoloration. When directing your prescriptions put up in Capsules, we believe you will find it to your own interest, as well as ours, also to the interests of your patients, to say: Use P., D. & Co.'s Empty Capsules.

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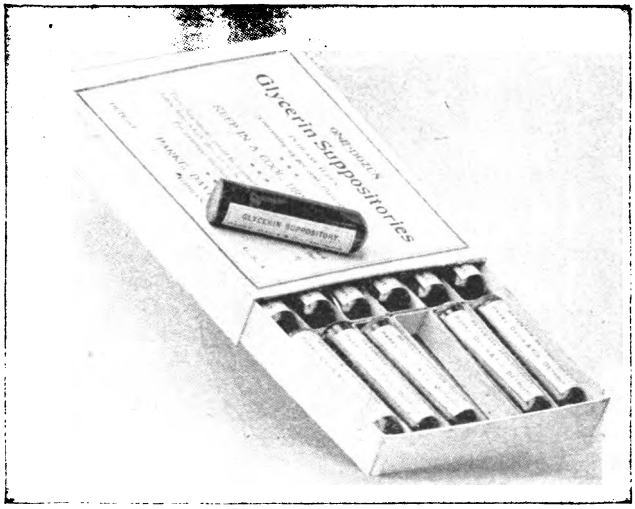
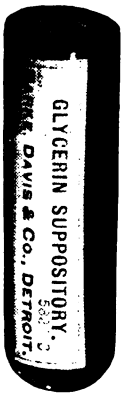
When Only One is Wanted.

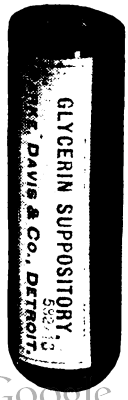
To facilitate the dispensing of single suppositories we have added a new style of package (see illustrations), each suppository being encased in a tube of amber-colored glass, securely stoppered.

Glycerin Suppositories (P., D. & Co.) afford a practical means of unloading the lower bowel quickly and without disturbing the stomach. They contain 95 per cent. of pure glycerin.





We, of course, shall continue to market our suppositories in bottles of one dozen and one-half dozen each. And with due precaution against exposure to heat and moisture, they will, in these containers, retain their form and therapeutic potency for an indefinite period.



Parke, Davis & Co.,

Home Offices and Laboratories, Detroit, Michigan.

Branches in New York, Kansas City, Baltimore, New Orleans.

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If you have any doubt whatever concerning the value of Taka-Diastase as a starch digestant, we ask that you apply the following simple test:

Make a stiff jelly by boiling 1 drachm of potato starch in 3 ounces of water, cool to body temperature, add about 1 grain of Taka-Diastase, and stir. The stiff jelly will be almost instantly converted into a watery solution, and in about 15 minutes all the starch will be converted into sugars.

Respectfully,

Parke, Davis & Co.

Home Offices and Laboratories, Detroit, Mich.
Branches in New York, Kansas City, Baltimore, and New Orleans.

AT THE REQUEST of many of our patrons we have added to our list of medicinal products a line of chocolate-coated tablets. You are respectfully invited to drop us a postal request for Formulæ and Prices.

The ingredients are the best, they disintegrate very rapidly, the finish is perfect, and the chocolate coating masks effectively ill-tasting substances.

One Hundred Million.

Don't you think, since pharmacists and physicians have been using our gelatin- and sugar-coated pills with perfect satisfaction for something like twenty-five years, it is rather late for any one to undertake to prove that they are insoluble? Possibly a few physicians were misled by the "hammer and board" test, and we say "possibly" advisedly, for the records of our Manufacturing Department show that during 1897 we marketed one hundred million pills *more* than in 1896.

Parke, Davis & Company,

Branches:
New York, Kansas City, Baltimore, New Orleans, U. S. A.

Manufacturing Chemists,

DETROIT, MICHIGAN.

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Continue to ask for Parke, Davis & Co.'s Anti-Diphtheritic Serum. We continue to lead in potency, efficiency and reliability of product. We are now supplying a serum testing

1750 **Antitoxic units per Cc.**

By far the most concentrated Antitoxin ever offered; the most reliable. Always marketed in hermetically sealed bulbs—not ordinary vials and corks. Latest literature mailed upon request.

Parke, Davis & Co.,

Home Offices and Laboratories, Detroit, Michigan.

Branches in New York, Kansas City, Baltimore, and New Orleans.

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O'C

Therapeutic Notes

PUBLISHED BY PARKE, DAVIS & CO.,
DETROIT, MICH.

No. 2. Fifth Year. September, 1898.

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There are times when there is not a minute to spare between the arrival of the Doctor and the demand for immediate action. When you are in need of a Hypodermatic Tablet, you are in need of a reliable article.

Always Use
Parke, Davis & Co.'s
HYPODERMATIC TABLETS.

The materials of which they are composed are absolutely non-irritant in character, and each tablet may be relied upon to contain precisely the quantity of medicament stated on the label.

They disintegrate instantly, with a resultant perfectly bland and transparent solution.

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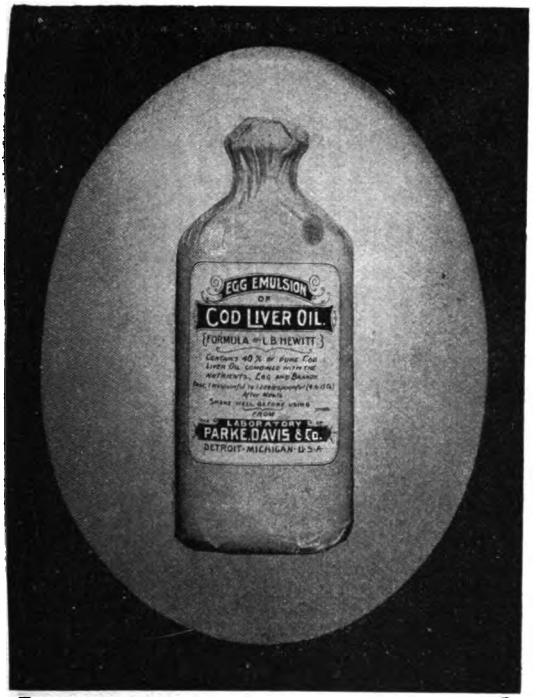


The National Dispensatory says of Irish moss: "Its nutritious elements exist in an exceedingly minute proportion;" and of acacia, "It cannot contribute much to real nutrition—that is, by providing materials for forming tissue."

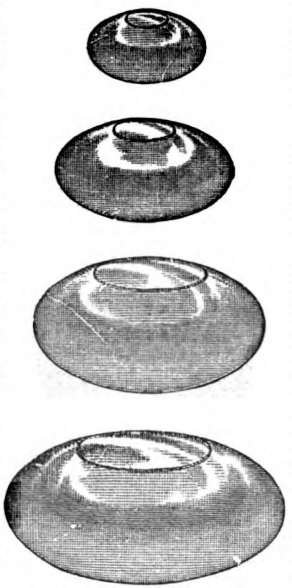
And yet this is just what is demanded of a good emulsion of cod-liver oil.

The ordinary emulsion of cod-liver oil therefore, for its nutritive properties, must depend entirely upon the proportion of cod-liver oil present. Irish moss or acacia not only add nothing to the therapeutic value of the product, but, to the contrary, load up the emulsion with non-assimilable gums—a burden to the digestive organs.

Parke, Davis & Co.'s EGG EMULSION of Cod-Liver Oil is all food. It contains 40 per cent. by volume of puré Lofoten cod-liver oil. It is emulsified with eggs alone, and flavored only with a fine quality of brandy. No acacia, no Irish moss, but cod-liver oil, eggs and brandy; every ingredient a nutrient. Palatable; permanent; all food.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.
Branches, New York, Kansas City, Baltimore, New Orleans.



Soluble Elastic Capsules (P., D. & Co.) offer a superior means for the administration of drugs possessing pungent, acrid, or oily properties. When drugs of this nature are taken in the ordinary way, it becomes a difficult matter to avoid the occurrence of nausea, which, as is well understood, very often seriously interferes with the production of the proper remedial effect. The enclosure of such substances in an envelope of *flexible* gelatin not only avoids giving offense to the palate, but allows the medicine to be exhibited with greater ease and in larger single doses.

Write for List.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.
Branches in New York, Kansas City, Baltimore, New Orleans.

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Ergot Aseptic.

The Ideal Preparation of Ergot for Hypodermatic Administration.

EXTRACTIVE matter is inert and causes abscesses. Ergotinic acid is a nerve depressant and irritant.

Aside from being entirely free from both extractive matter and ergotinic acid, Ergot Aseptic is Physiologically Tested, Standardized, and Sterilized.

Put up in hermetically sealed glass bulbs, which exclude all germs or other contaminating substances. No necessity therefore for alcohol, glycerin, salicylic acid, or other preservative, which might prove irritating. Each bulb contains one cubic centimeter, representing two grammes of standard Ergot. It is very rapid and powerful in its effects, producing strong uterine contractions within a surprisingly short time.

LITERATURE UPON REQUEST.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.

Branches in New York, Kansas City, Baltimore, and New Orleans.

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Therapeutic Notes

FIFTH YEAR. DETROIT, MICH., SEPTEMBER, 1898. No. 2.

THERAPEUTICS.

TYPHOID FEVER IN LOUISIANA, AND ITS TREATMENT.

BY FRANK FENWICK YOUNG, B.S., M.D., M.E.

In the last two years it has been my good fortune to become thoroughly acquainted with the "Woodbridge Treatment of Typhoid Fever"—a God-send to suffering humanity.

I am skeptical about adopting anything new, and I was unusually so regarding Dr. Woodbridge's treatment; but after two years of close watching, and after using it in dozens of cases, *always* with the same never-failing results, I do most heartily indorse it, and recommend it to the profession. I do not use it exactly according to Dr. Woodbridge. I keep my patient quiet, in a horizontal position, and on an exclusive milk diet with whiskey. My patient is immediately given Dr. Woodbridge's No. 1 tablets every half-hour or every hour until bowels move freely several times every twenty-four hours; they are then continued every two hours throughout the course of the disease. About the fourth day I begin No. 3 (I do not give the formula, for I suppose every physician knows it, owing to the universal distribution of literature upon the subject), and continue it through the entire course of the disease, with *always* the same gratifying results. I have heard learned professors in some medical colleges ridicule it without ever having faithfully tried it, and I say to them: "He who laughs last laughs best."

Woodbridge has unquestionably immortalized his name, and it only requires time to prove it. I make the assertion, and stand ready to prove it, that I will cure any case of typhoid fever in from ten to eighteen days, and there are thousands of good physicians in America ready to back my statement. A death from typhoid fever with the Woodbridge treatment is an exceptionally rare occurrence. This voices the experience of dozens of physicians whom I know. Famed and learned men, give Woodbridge a fair trial and be convinced! Defervescence will invariably set in with your cases in from three to five days. You may diagnose your cases as you please—continued, remittent (true remittent never gives me trouble, and always yields nicely to quinine properly administered), or typhoid fever. They are cases that always hang on your hands from four to eight weeks, without the Woodbridge method, but with it they are over without any serious symptoms arising in from ten to eighteen days.

As there is considerable typhoid at present writing here in Louisiana, in Kentucky, and elsewhere, I hope this article will draw the attention of our physicians to the Woodbridge treatment, and thus add laurels to themselves and Dr. Woodbridge and save their patients.—*Louisville Medical Monthly*, March, 1898, pp. 1, 2, and 3.

These Do Not Invite Lay Patronage.—We have adopted for our Globules of Pure Santal Oil, P., D. & Co., Five Minims, a plain label simply indicating that each globule contains five minims of Santal Oil, P., D. & Co., and suggesting a proper dose. We have intentionally omitted any description of properties which would serve to place the remedy within the reach of the laity. Each globule contains an absolutely pure oil distilled in our own laboratory.

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A PERVERSION OF THE TRUTH.

THE DEADLY PARALLEL EXPOSES AN ACT UNWORTHY OF A RESPECTABLE MANUFACTURER.

Fictitious Statement sent out to the Medical Profession and Drug Trade by the H. K. Mulford Co., of Philadelphia.

CALIFORNIA STATE BOARD OF HEALTH.

The antitoxin used in California is made in this country; and after considerable investigation and trials of the German and French preparations, we are giving our preference to the American production. . . . The antitoxin now used by the Board is that of H. K. Mulford Company, Philadelphia, Pa. The American product is put up in better form for transportation and handling, which is of itself an important item. The Concentrated "Extra Potent" (500 units to each c. c.) is the best.—J. H. DAVISSON, Los Angeles, Secretary California State Board of Health, in Report on Diphtheria Antitoxin.

Statement as it Actually Appeared in "Report on Diphtheria Antitoxine," by the then President of the California State Board of Health.*

Most of the antitoxine used in California is made in this country; and after considerable investigation and trials of the German and French preparation, we are giving our preference to the American production; and most of the antitoxine used by the Board is from the laboratory of Parke, Davis & Co. The American product is put up in better form for transportation and handling, which of itself is an important item. The stronger preparations of antitoxine are the best, and the average curative dose is (when administered early) 1,000 units (Behring's standard), and in severe cases, or adults, or advanced cases, or croup, 1,500 units should be given; and these doses may be repeated every twelve to twenty-four hours till 5,000 or 6,000 units are given in a single case. Two hundred units is an average immunizing dose. The usual antiseptic precautions should be observed, and no more care is required in the administration of antitoxine than in other "up to date" procedures in medicine and surgery. The injection should be made under the skin in the cellular tissue, and not into the muscular tissue, and over the chest, sides, or back, according to circumstances; but the dose being large, there is often considerable reaction and soreness at the site of the injection, which interferes with movements or handling for a day or two. For immunizing, an ordinary hypodermic syringe may be used, and the deltoid region is best, as it ordinarily is, for all injections for any purpose.

*Page 271, Fourteenth Biennial Report of the State Board of Health of California.

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DR. DAVISSON'S LETTER OF PROTEST IN JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION, MAY 28, 1898, PAGES 1301 AND 1302.

LOS ANGELES, CAL., May 18, 1898.

To the Editor:—In a forty page booklet entitled, "The Present Status of Diphtheria Antitoxin Serum," issued in large editions by H. K. Mulford & Co., of Philadelphia and Chicago, on page 31 appears a testimonial in which is a wilful change of name of the firm mentioned, which alleged testimonial reads as follows:

"California State Board of Health. The antitoxin used in California is made in this country, and after considerable investigation and trials of the German and French preparations, we are giving our preference to the American production. . . . The antitoxin now used by the Board is that of H. K. Mulford Company, Philadelphia, Pa. The American product is put up in better form for transportation and handling, which is of itself an important item. The concentrated 'Extra Potent' (500 units to each c.c.) is the best.—J. H. Davisson, Los Angeles, Secretary California State Board of Health, in Report on Diphtheria Antitoxin."

Permit me to say that I was never secretary of the California State Board of Health, and in the only report which I made upon antitoxin while a member of the said Board, I did not have occasion to mention the product of the above named firm. I enclose said report (which was published in Transactions of California State Board, and is a part of the official records of the State), which tells entirely a different story. As a member of the AMERICAN MEDICAL ASSOCIATION since 1877, I dislike to be placed in a false light before my confrères to satisfy mercenary ends of any over-zealous firm. I am very truly,

J. H. DAVISSON, M.D.,
Ex-Pres. California State Board of Health.

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"EXPLANATION" MADE BY THE H. K. MULFORD CO., IN JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION, P. 37, JULY 2, 1898.

PHILADELPHIA, June 16, 1898.*

To the Editor:—We note the letter recently addressed to your JOURNAL, (May 28, p. 1301) by Dr. J. H. Davisson of Los Angeles, Cal., ex-president of the State Board of Health, relative to an irregular use of a recent report made by him, which was published in our antitoxin brochure about a year ago.

It was far from our intention to cause Dr. Davisson any annoyance, or to make any improper use of his name. It was not our intention to have it appear that the Doctor personally endorsed our product, but that the State Board of Health of California discriminated in favor of American antitoxin, and since, at the time our brochure was published, we were supplying, and have continued to supply, the California State Board of Health with Mulford's Concentrated Antitoxin, the statement as published in our brochure is correct.† Our copy supplied the publisher, incorporated the above with a quotation from Dr. Davisson's report. Unfortunately, our instructions regarding the use of the bracket were not carried out. The article should have read according to our copy as follows:†

CALIFORNIA STATE BOARD OF HEALTH.

The antitoxin used in California is made in this country and after considerable investigation and trial of the German and French products, we are giving our preference to the American production. The American product is put up in better form for transportation and handling, which is of itself an important item. [The antitoxin now used by the Board is that of H. K. Mulford Co. of Philadelphia.† The concentrated "Extra Potent" (500 units to each c.c.) is the best.]

We extremely regret that the bracket was omitted in placing this matter in type. Certainly we did not intend to have it appear that our product was personally endorsed by Dr. Davisson, but the fact that the California Board of Health was being supplied with Mulford's Antitoxin at the time our brochure was published, makes the statement as appears in our brochure, with the exception of the personal endorsement of Dr. Davisson, absolutely correct.

Thanking you in advance for the publication of this explanation, we are Very truly yours,

H. K. MULFORD COMPANY.

* Please note this date.—Parke, Davis & Co.

† Underscoring lines ours.—P., D. & Co

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STATEMENT OF DR. J. R. LAINE (SAN FRANCISCO, JULY 12, 1898), EX-SECRETARY AND EXECUTIVE OFFICER OF THE CALIFORNIA BOARD.

DR. J. R. LAINE,
OFFICE, FOURTH FLOOR CROCKER BLDG.
Hours, 2 to 4
Telephone, Main 5064
Residence, 920 Sutter Street
Telephone, East 948.

SAN FRANCISCO, CAL., July 12, 1898.

This will certify that the California State Board of Health did not at any time during the seven years ending April 1897, endorse, nor adopt, officially or otherwise, the diphtheria anti-toxin manufactured by H. K. Mulford & Co. of Philadelphia.

J. R. LAINE, M.D.
Ex. secty. & executive officer of the Board.

RESOLUTIONS PASSED JULY 12, 1898, BY THE PRESENT BOARD.

SAN FRANCISCO, July 12, 1898.

Whereas, It has come to our knowledge that in the official report made by Dr. J. H. Davisson, Ex-President of the State Board of Health of California, he made favorable mention of the Anti-Diphtheritic Serum manufactured by Parke, Davis & Co.; and

Whereas, we find that the H. K. Mulford Co. have seen fit to appropriate this report substituting the name of H. K. Mulford Co. for that of the aforesaid Parke, Davis & Co.;

Therefore resolved, that this Board deprecates such conduct on the part of H. K. Mulford Co. inasmuch as their act amounts to a falsification of our records.

I hereby certify that the above is a copy of a resolution adopted by the State Board of Health of California at a meeting held in San Francisco, July 12th, 1898.

W. P. MATHEWS,
Secretary.

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AN EFFICACIOUS ALTERATIVE AND A USEFUL VEHICLE—PLEASE SCAN THE FORMULA CLOSELY.

A glance at the formula of Syrup Trifolium Compound may not be amiss, since it will serve to show why this combination, as introduced and manufactured by Parke, Davis & Co., is superior in efficacy to the usual type of alterative. Each fluidounce contains the active constituents of:

Red clover blossoms, 32 grains.
Lappa, 16 grains.
Berberis aquifolium, 16 grains.
Xanthoxylum, 4 grains.
Stillingia, 16 grains.
Phytolacca root, 16 grains.
Cascara amarga, 16 grains.
Potassium iodide, 8 grains.

Each one of its ingredients possesses some degree of alterative property, but combined together they are unexcelled. The remedy has been long and faithfully tried in some of the largest clinical centers and has everywhere met with unqualified praise. Prescribed in all forms of secondary syphilis, its restorative action in nearly every case is prompt and decisive.

Syrup Trifolium Compound may also be employed to great advantage as a vehicle for the more pronounced inorganic alteratives; such as calcium iodide in the acne of adolescents and scrofulous eruptions; calcium sulphide in the case of buboes and suppurating glands; mercuric iodide in specific ulceration of fauces; and for the administration of larger doses of potassium iodide in gumma or tertiary syphilis.

In anemia, chlorosis, amenorrhea, etc., it may be alternated with some iron preparation such as dialyzed iron with very happy results.

The physician can readily suggest modifications for its employment in each individual case, but it has an alterative power of its own which in very many cases will be found sufficient. It is an excellent preparation with a wide range of usefulness. Samples and literature sent on request.

INCONTINENCE IN CHILDREN.

BY STANLEY WARD, M.D., HAMPTON, N. H.

In incontinence of urine in children when the trouble is not caused by anatomical or mechanical causes, such as gravel, worms, constipation, the following prescription has been found serviceable:

Ext. rhus. aromat. fl. (P., D. & Co.), 2½ drachms.
Ext. ergot. fl. (P., D. & Co.), ½ ounce.
Ext. belladonnæ fl. (P., D. & Co.), ½ drachm.
Strychninæ sulph., ¼ grain.
Syr. aurant. cort., q. s. 4 ounces.

M. Sig.: One teaspoonful four times a day to a child three years old.

If this fails, the belladonna may be increased, or increasing doses of atropine may be used.

Diurnal incontinence requires a modification of the above formula, with sodium and potassium bromides added, according to the following:

Ext. rhus. aromat. (P., D. & Co.), ½ drachm.
Ext. ergotæ fl. (P., D. & Co.), 6 drachms.
Ext. belladonnæ fl. (P., D. & Co.), ½ drachm.
Potassium bromide, 2½ drachms.
Sodium bromide, 2½ drachms.
Strychninæ sulph., ½ grain.
Syr. aurant. cort., ad 4 ounces.

M. Sig.: One teaspoonful three to five times a day to a child five or six years old.

—*Pediatrics*, abstract.

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In continuation of this subject an article has just come to our attention on "The Treatment of Incontinence of Urine in Children with the Liquid Extract of Rhus Aromatica,"* by Ludwig Freyberger, M.D. Briefly summarized, his report of thirty cases shows that no less than 60 per cent. of the cases were permanently cured, 33⅓ per cent. were improved, and but 6⅔ per cent. evinced no improvement. The doses employed were five to ten minims for children two to five years of age, ten to fifteen minims for those between five and ten, and fifteen to twenty

**Treatment* (London, Eng.), May 12, 1898, p. 129.

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minims for older children. The author claims that it is superior to belladonna. A temporary exacerbation lasting from four to six days, occurring about the close of the first week's treatment, was noticed in many cases, which, if not anticipated, might lead to an unadvised discontinuance of the remedy.

THE ACTIVE PRINCIPLE OF SANTAL OIL.

The therapeutic value of this oil depends upon its content of Santalol. We very recently analyzed a sample of Santal Oil from pearls of this article, which were offered on the market at a price below what a good oil should cost. The oil contained but 69.11 per cent. of santalol, with a considerable amount of oil of cassia.

Our Santal Oil averages 95 per cent. of Santalol. We distil it in our own Laboratory and can guarantee its purity. We were driven to undertake its distillation by the difficulty that exists in ordinary commercial channels of securing a pure article. This oil of our own distilling enters into all our pharmaceutical products where the formula calls for Santal Oil.

PRACTICAL APPLICATIONS OF GERMICIDAL SOAP, P., D. & CO.

As a general disinfectant for surgical work it is unequaled. Ready for instant use. No weighing or measuring to be done. No waste. Hands, instruments and field of operation quickly disinfected with *one* material. As a germ-destroyer *at least* five times more powerful than corrosive sublimate or carbolic acid.

It is peculiarly adapted to the needs of the obstetrician and gynecologist: a lubricant and sterilizer in one. As a douche it tends to dissolve pus, blood, and mucus, whereas mercuric chloride and carbolic acid coagulate them.

If a cake of the soap be rubbed in water until a very heavy lather is formed, the solution will contain approximately 1–5000 mercuric iodide. This solution is more effective than 1–1000 bichloride and less than one-fifth as poisonous. It can with safety be placed in the hands of nurse or patient for vaginal douching, with instructions to make, as may be desired, (*a*) a light lather (1–10000 to 1–20000 HgI_2), or (*b*) a heavy (1–5000 to 1–10000).

Its cleansing and disinfecting power in cases of fetid discharge is noteworthy.

Careful physicians wish to disinfect their hands after examining cases of syphilis, gonorrhea, tuberculosis, and other communicable diseases.

Offensive perspiration is probably due to bacterial decomposition of the secretion. The soap has been used in a few cases of this kind, with more than pleasing results.

To prevent the spread of infection in scarlet fever, measles, chicken-pox, or smallpox, such a disinfecting agent as this will be found both convenient and serviceable.

In all the parasitic skin diseases the soap is of peculiar value. Owing to the fact that it does not coagulate albumen, the antiseptic has great penetrating power.

In a considerable number of cases of eczema the use of the soap gives immediate relief. We respectfully ask of the profession a careful trial of it in this disease.

In most cases of skin disease the affected part should be washed two or three times a day with the soap, leaving the lather on from one to five minutes. In some cases better results will follow if the wet soap is rubbed over the skin and the lather allowed to remain.

Note.—In a few cases where the skin is peculiarly sensitive the soap may cause irritation, unless used in very dilute solution.

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Report by the Columbus Medical Laboratory, Chicago.

CHICAGO, ILL., December 7, 1897.

Parke, Davis & Co., Detroit, Mich.:

GENTLEMEN—We obtained cakes of your Antiseptic Soap from a druggist here and subjected them to bacteriological test, to determine the germicidal efficiency of the soap. These tests have

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extended over a period of five weeks and have proved to entire satisfaction that the mercuric iodide soap possesses a very high antiseptic power, fully equal to that of any of the practically useful antiseptics and much greater than many of them. Single bacteria of most any kind, placed in the ordinary lather made by rubbing the cake, are killed in from one to one and a half minutes, while instruments and surfaces can be sterilized in from two to three minutes. Some of the details of the experiments are herewith presented.

(Signed)

COLUMBUS MEDICAL LABORATORY.

A POST-PARTUM VAGINAL SUPPOSITORY.

BY DR. W. P. MANTON,

Professor of Clinical Gynecology and Adjunct Professor of Obstetrics in the Detroit College of Medicine; Gynecologist to Harper Hospital, etc.

In all labors there is more or less injury to the parturient canal during the passage of the fetal parts. Lacerations of the cervix invariably occur, contusions, abrasions and cracks of the vagina take place, and in many instances more or less tearing of the perineum results. The constant flow of the lochia over these parts may or may not interfere with rapid and perfect healing, but infection from without is certainly more liable to take place where a solution of continuity exists in any portion of the vaginal wall.

For the past six or eight years, since I abandoned the routine use of the vaginal douche, I have been in the habit of having a suppository containing either iodoform or boric acid and aristol slipped into the patient's vagina by the nurse at the morning and evening toilet of the external genitals. These drugs act not only as checks to microbic development, but promote the healing of all excoriations, and thus serve as preventives of infection. Such vaginal suppositories can be made extemporaneously by any druggist, but as the perfect article demands something more than the mere mixing of the various ingredients, and as the medicines themselves have been found often to contain noxious germs, I have again had recourse to the manufacturing pharmacist, in order to be sure of the products used. Parke, Davis & Co. have prepared for me a suppository which is not only uniformly the same, but which, on the authority of Dr. McClintock, is absolutely germ-free, a desideratum which will be appreciated by every careful obstetrician. Every article used in the construction of the suppositories is first sterilized before the combination is made, each suppository is wrapped in sterilized paraffin paper, and six of the cones are placed in a sterile tube which is carefully sealed. I consider these obstetric cones of the greatest value and service for the purpose mentioned.—*Physician and Surgeon.*

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In accordance with the foregoing we have added to our list two suppository formulæ for vaginal use. The one contains five grains iodoform; the other, five grains boric acid and three grains aristol. Put up in sterilized tubes containing six suppositories, two tubes in a case.

A POWERFUL AND PROMPT CONTROLLER OF PAIN.

There is a large class of patients who must have the pain-controlling remedy available for administration by the mouth. The remedy will be all the better if the relief desired from it is not alone obtained from the morphine it may exhibit.

Such a remedy is Chlor-Anodyne. The formula appended shows it to contain chloroform, Indian cannabis, and dilute hydrocyanic acid in small but sufficient proportions to manifest antispasmodic and anodyne effects of their own. Being also rapidly diffusible they act as synergists to the small dose of morphine and closely imitate in rapidity of pain-relieving action the quick results of a hypodermic injection.

Each fluidounce contains:

Morphine hydrochlorate, 2⅞ grains.
Fluid extract Indian cannabis, 46 minims.
Diluted hydrocyanic acid, 9 minims.
Chloroform, 46 minims.
Oil peppermint, 1½ minims.
Tincture capsicum, 1½ minims.

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CHRONIC CATARRHAL GASTRITIS.

BY A. HAMILTON DEEKENS, M.D., TACOMA, WASH.

[Extract from a paper read before the Pierce Co. Medical Society, October, 1897, and published in the *Medical Sentinel*, March, 1898.]

With regard to the medicinal treatment of chronic catarrhal gastritis, the drugs that may be used are legion. Probably the most generally useful, however, is hydrochloric acid. It should preferably be given well diluted, and from half an hour to an hour after meals, as it is then that the stomach most needs its assistance. The tendency is to give it in larger doses than formerly used—from fifteen to twenty drops at least should be given. Ewald gives it in drachm and drachm and a half doses. Pepsin is much less frequently indicated, though in the later stages of the disease, when more or less atrophy of the secreting ducts has taken place, and the stomach is unable to furnish sufficient pepsin, stimulation by means of a small amount of an alkali, or a drink of hot water before eating, will produce good results. Diastase is becoming quite a favorite remedy, as it is a very active diastatic agent, and is said to have the power of converting one hundred times its weight of starch into soluble glucose. Diastase is especially indicated in those cases of rapid bolting of the food which prevents the proper admixture of saliva. It is commonly given in powder, either with or directly after eating. Taka-Diastase is probably the best substance of this kind on the market. It is not unpleasant to take, and is generally given in from three- to five-grain doses. It has produced the best results in those cases marked by great flatulence and acidity with cardialgia.

"GOOD WINE NEEDS NO BUSH."

The admonition comes to us from articles written by eminent medical men of America and other countries when dilating upon the excellent clinical results following a systematic use of Parke, Davis & Co.'s Syrup Hematic Hypophosphites, that full doses are rarely as suitable or profitable as are smaller doses more frequently repeated. This has been reported in almost the entire range of its therapeutic value; such, for instance, as the treatment of anemia, tuberculosis, bronchitis, malignant cachexia, eczema, or for the correction of depraved nutrition, malassimilation, and nervous debility.

SYRUP HEMATIC HYPOPHOSPHITES is an elegant and permanently clear liquid, quite different in this respect from the muddy preparations with their unsightly precipitates which are to be found upon the market under the title of "hypophosphites." The dose is from one to two fluidrachms, but in accordance with the suggestion above offered, it will be found better to give one fluidrachm six times a day rather than double that amount, two fluidrachms, three times a day.

Our Syrup Hematic Hypophosphites forms no exception to our rule to publish every formula. Each fluidounce, as stated on the label, contains:

Potassium hypophosphite, 1½ grains.
Manganese hypophosphite, 1 grain.
Strychnine hypophosphite, ⅛ grain.
Ferrous hypophosphite, 1¼ grains.
Calcium hypophosphite, 1 grain.
Quinine hypophosphite, 7-16 grain.

SOLUTION FORMALDEHYDE 40 PER CENT.

An Antiseptic and Germicide of Wonderful Power and Usefulness.

Formaldehyde is a gas soluble in water to the extent of 40 per cent. by volume, and our Formaldehyde Solution is a saturated solution of this gas.

Putrid odors are promptly neutralized, and pernicious micro-organisms destroyed by its vapor, no injury being done to delicate fabrics in the process when properly conducted.

Formaldehyde Solution 40 per cent., put up in cork-stoppered bottles, will not lose strength with age under normal conditions, if afforded proper protection. We furnish our Solution in pound, half-pound and quarter-pound oval flint bottles.

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SURGERY NOT THE SUMMUM BONUM.

The reaction which is now being experienced against the excessive and altogether too radical use of the knife in gynecological practise is due very largely to the beneficial results which have been from time to time reported regarding the use of such medicinal agents as Liquor Sedans, that may be classified as anodyne astringents. Many cases of utero-ovarian hyperesthesia and irritability, and even those where it was evident that some congestion of the ovaries coexisted, have been found to be successfully relieved by medicinal treatment when rash or indiscriminating surgery has in similar conditions ordered oophorectomy.

Liquor Sedans is a palatable combination of three very valuable articles of the materia medica, each of which possesses indications of merit but which together find these same properties reenforced in a manner that cannot be duplicated when acting alone. Each fluidounce represents 60 grains of Black Haw, 60 grains of Golden-seal, and 30 grains of Jamaica Dogwood.

Viburnum prunifolium (Black Haw) is an excellent ovarian sedative. It appears to exert a specific action with tendency to regulate functional activity.

Hydrastis canadensis (Golden-seal) possesses an indisputable elective action of constriction in the various forms of chronic phlebitis, and is a very energetic vasoconstrictor and tonic in venous engorgement. As a hemostatic it is superior to ergot in the different forms of metrorrhagia and hemorrhages of fibromyomas. It is tonic and sedative to mucous tissue.

Jamaica Dogwood is a powerful sedative, manifesting its virtue chiefly in the ovarian tract with reflex tendency to the uterus. Moreover, it is a general analgesic, antispasmodic, and carminative.

In dysmenorrhea cases, usually a most intractable class, very satisfactory results can be obtained with the use of Liquor Sedans where formerly alcohol or morphine were periodically resorted to. In functional irregularity of the menses accompanied with ovarian irritability it will also prove a valuable agent in the hands of the physician and a boon to the sufferer. In menorrhea and metrorrhagia, and even in uterine hemorrhage following the third stage of labor, it will be found invaluable, although for this purpose a larger dose would be necessary. It exercises no ecbolic action on uterine muscle, and Liquor Sedans can therefore be safely given for its anodyne effect in any stage of pregnancy.

A PERSONAL BEREAVEMENT—QUALITY OF THE SERUM BLAMED.

BY PROF. J. E. BUCHANAN, M.D., ST. LOUIS, MO.

In November, 1895, my boy, four and one-half years old, perfectly healthy and robust, was stricken with diphtheria. On the third day of his illness, when it was decided by the attending physicians to use Antitoxin, he presented about the following symptoms: Temperature, 101° F.; pulse, 120; *no* albumen in urine; considerable edema about the throat; and a free membranous deposit over tonsils, throat and posterior part of the mouth; but little constitutional involvement. Within five hours after ten cubic centimeters of home Antitoxin of unknown strength was used, the pulse dropped to 60 beats per minute and became intermittent. The urine became heavily loaded with albumen. Twelve hours after the use of the Antitoxin the child ceased to pass urine, and though he lived nearly four days longer he did not void another drop, finally dying in a uremic spasm.

I have every reason to think that my child's death was due to Antitoxin poisoning, and I am further convinced, after two years' experience with other brands of Antitoxin, that the fatality was chargeable to the quality of the drug used. After a careful examination of all makes of Antitoxin I am more favorably impressed with Parke, Davis & Company's than with any other I have seen. The careful way in which it is put on the market excludes contamination and commends it to me.

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EUTHYMOL—A LIQUID ANTISEPTIC OF THE MOST VARIED USEFULNESS.

The name is not a copyrighted one. It is a condensation of the title "Eucalyptus and Thymol Antiseptic," which was originally given to this preparation.

Euthymol is a liquid antiseptic of high germicidal power, but possessing none of the irritant properties which forbid the use of some of the more powerful antiseptics. From its bland nature it is capable of being freely used in any situation and for any purpose where an antiseptic fluid is apt to be used. It may be employed internally for flatulent or fermentative indigestion, or used as a throat spray in conjunction with the other treatment in infectious diseases of the nose, mouth, and pharynx. Its odor is agreeable and a source of pleasure in its use rather than otherwise.

The formula will serve somewhat to indicate the wide range of usefulness which is enjoyed by Euthymol. Each fluid-ounce contains:

Oil eucalyptus, 3-8 minim.
Oil gaultheria, 9-32 minim.
Fluid extract wild indigo, 1 1-4 minims.
Boric acid, 10 15-16 grains.
Menthol, 5-64 grain.
Thymol, 15-32 grain.

Write us for full descriptive circular.

PROSTATIC ENLARGEMENT IS NOT THE INEVITABLE CONCOMITANT OF OLD AGE!

What physician cannot remember having his patience sorely tried in the treatment of prostatic enlargement, after having vainly tested every known agent for relief in such cases, not omitting electricity and the catheter? Often the only remedy to be found was in the operation of the specialist. It is no longer necessary, however, that as one advances in life he should have his years clouded with the fear that he must suffer from a disease which has hitherto been considered the necessary concomitant of old age—enlargement of the prostate gland. (Cystitis and vesical catarrh, too, are frequently obdurate, and have resisted treatment until the patient begins to lose courage.) With the remedies discovered of late years such conditions are less to be feared, and, when present, they are amenable to treatment. In diseases of this class, and of the genito-urinary tract in general, the Elixir Saw Palmetto and Santal Compound (Parke, Davis & Co.) is, theoretically and practically, an excellent combination.

Saw Palmetto is now admitted to be *par excellence* a sedative and nutrient to irritated mucous membrane, and of particular service in prostatic troubles and sexual malnutrition. In urinary incontinence, cystitis, vesical catarrh, uric or phosphatic gravel and urethritis, corn-silk has been used with great success. The action of Sandalwood, possessing in a moderate degree the healing properties of santal oil, though less objectionable to take than the latter, is too well known to need comment here. Corn-silk acts as a diuretic, demulcent, and mild antiseptic, being of special value in cases where ammoniacal decomposition of the urine takes place in the bladder with its usual accompaniment of vesical irritation.

Elixir Saw Palmetto Compound (P., D. & Co.), being a combination of these three remedies, possesses the medicinal properties peculiar to each, in dispelling disease of the genito-urinary tract.

Chronic Singultus.

I have glanced through your Complete Catalogue for 1898, and consider the "Table of Equivalents" and the "Property and Dose List" of great value in connection with the other contents of the brochure. Included in the latter I must give you my unqualified approval of your "Compound Cerebral Sedative, ℞ 'A.'" In practise I have found it invaluable and quite recently in a case of chronic singultus which had baffled the efforts of others, and well qualified to subdue it. I attributed the recovery to this most excellent combination.—EDWARD S. SHARPE, M.D., Salem, N. J., May 31, 1898.

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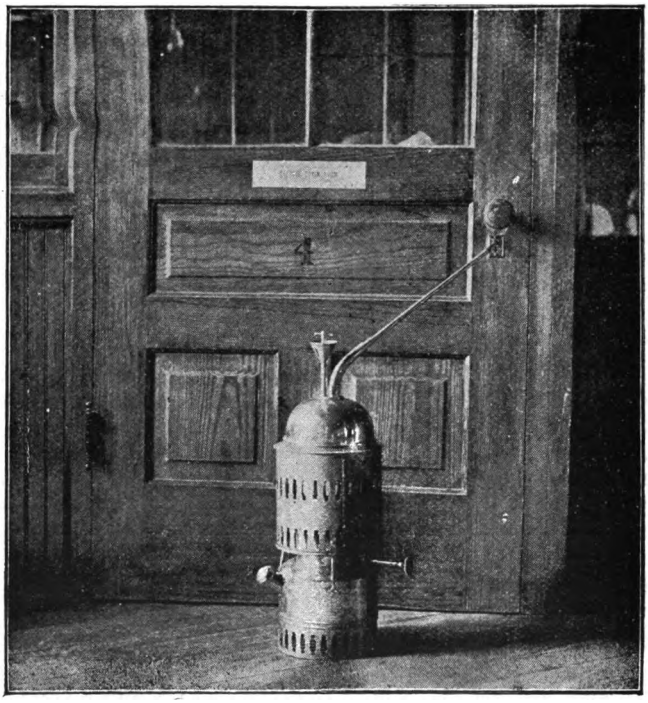
PROFESSOR NOVY'S FORMALDEHYDE GENERATOR—SIMPLE, EFFICIENT, AND ECONOMICAL.

An article on "The Disinfection of Rooms," by Prof. F. G. Novy and H. H. Waite, appears in the *New York Medical News* of May 21, 1898, in which results are detailed of experiments with formaldehyde for this purpose. A simple but



efficient generator is described therein, which we are now able to supply to those desirous of employing formaldehyde in the disinfection of rooms, furniture, and articles of clothing, such as linen, quilts, blankets, etc.

We will be pleased to furnish upon application a reprint of Prof. Novy's article above referred to.

Formaldehyde is an antiseptic of remarkable potency under proper conditions.

KOLA DURING LABOR.

BY F. GUNDRUM, M.D., SACRAMENTO, CAL.

Recently I had a case in which for ten days I attended a lady who was suffering from an obstinate malarial fever; during this time she had a rather severe uterine hemorrhage, which exhausted her very much. Owing to a very irritable stomach, little food was taken during her illness; and this circumstance, together with the fever and hemorrhage and a not very strong constitution, resulted in a condition of great weakness; in the midst of which, on September 17, labor at full term began. What to do to keep up patient's strength when she could not take food, nor yet quinine owing to an idiosyncrasy, became a serious question.

Having proved from my own experience that kola was capable of relieving exhaustion and prolonging force, I concluded to

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try it on my patient. Labor began at noon and ended at 6 P.M. She was given a teaspoonful of Parke, Davis & Co.'s fluid extract of kola every hour from the commencement of labor—which required no instrument or manipulation of any kind. The patient, her nurse, her mother, and myself, were all astonished at the easy progress of parturition, and the entire absence of weariness and exhaustion; the patient said it was the best and easiest labor of the four she had had, and that she felt better and stronger after labor was completed than before it began. The remedy, given on the basis of its physiological action, surpassed our expectations. Whether it stimulated uterine muscular force, I do not know. The pains were good and strong, the second stage of labor lasting but an hour.

This is a new field for kola. Physiologically it is an ideal remedy in delicate subjects and in tedious labors.—*Therapeutic Gazette.*

QUICK-ACTING, RELIABLE, AND ASEPTIC ERGOT—A FINE PREPARATION.

This is what we aim to furnish the physician in our "Ergot Aseptic," which is specially designed for use hypodermatically.

When Ergot is indicated, as physicians very well know, its results are awaited with a good deal of anxiety—quickness and reliability of action are *sine qua non*—to lean upon a broken reed, a poor preparation, in such emergencies is fatal.

We test all the ergot which we purchase by physiological test on the living animal. All finished product is similarly tested and must come up to the same standard. Ergot Aseptic has been so tested and is guaranteed *reliable*. The *quickness* of action is insured by hypodermatic injection.

Ergot Aseptic is a sterilized preparation and contains no preservative since it needs none. It contains no bacteria, and being hermetically sealed in glass bulbs is protected from germ-infection.

Ergot Aseptic is free from extractive matter, which causes abscesses. It is also free from ergotinic acid, which (subcutaneously) acts as a paralyzant of the nerve-centers and also causes abscesses.

Ergot Aseptic is a concentrated preparation—each bulb contains one cubic centimeter and represents two grammes of prime drug.

Finally, Ergot Aseptic is a convenient preparation. It is only put up in bulbs, and each bulb is a dose to be used on one occasion only. There is absolute sterility, absolute safety, in the use of Ergot Aseptic.

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243 CASES OF TYPHOID FEVER—TWO DEATHS.

BY NEWTON M. WADE, LEAD, S. D.

Since the autumn of 1896 I have used the Woodbridge method exclusively in the treatment of typhoid fever, and during the interval I have treated 243 cases, with a death loss of two. In every case this treatment has reduced the duration of the fever to an average of sixteen days. In many cases the fever has been aborted—in other words, it has been brought to a full stop, convalescence beginning before the expiration of nine days.

In all the cases under my care there has been a marked absence of tympanitis and delirium.

Equally good results have followed the employment of this treatment by Dr. L. D. Bailor, of this city.

After our severe epidemic of typhoid fever in 1896–97, I wrote Dr. Woodbridge, reciting the happy results following the application of his theory. There is no question in my mind as to the great value of this method of treatment, and I doubt not that the medical world is gradually becoming convinced of its wonderful virtue.

USE ASSAYED PRODUCTS.

[From Hare's "Practical Therapeutics," 6th Ed.]

Every physician should make careful investigation into the quality of all preparations which he employs. That these remarks are not out of place will be seen

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by the fact that very recently an intimate friend of the writer bought from five of the leading druggists of Philadelphia six ounces of tincture of nux vomica which were stated to have been made according to the directions of the United States Pharmacopœia. That made by perhaps the leading druggist of the five contained twice as much strychnine and brucine as it should, and had twice as much solid residue; or, in other words, a physician prescribing this tincture in full dose would probably have poisoned his patient and reported the case as one of unusual susceptibility to drugs! On the other hand, the author has recently seen a tincture of nux vomica which contained only a trace of alkaloid, but had much inert solid residue. All these disadvantages may be avoided if physicians will insist that the druggists who dispense the drugs they order shall either themselves prepare assayed products, or purchase such products from any one of the large manufacturing chemists who put assayed goods on the market.

CHRONIC FACIAL ERYSIPELAS.

BY JOHN MADDEN, M.D., MILWAUKEE, WIS.

L. A. M——, 40 years of age, subjected to repeated attacks of facial erysipelas during the past four or five years, had had eight attacks of considerable severity. The disease generally began on some point of the face and extended over the whole head, and on two or three occasions involving the neck and one shoulder. The length of these attacks varied from fourteen days to two and a half months. About the first of February a characteristic attack began on the right ala of the nose, extending upward and backward over the right cheek. The patient applied for treatment on the second day of the disease. At that time the parts bore all the characteristic signs of erysipelas. On the morning of the third day ten cubic centimeters of P., D. & Co.'s Antistreptococcus Serum was injected in the subcutaneous tissue between the shoulders. Two hours afterward the patient declared that he felt relieved. In twenty-four hours the activity of the disease seemed to have completely ceased, and in forty-eight hours desquamation had begun. The progress of the disease from this point was uninterrupted until complete recovery.

USE DIPHTHERIA ANTITOXIN PROMPTLY AND BOLDLY.

BY DR. S. SOLIS-COHEN, PHILADELPHIA, PA.

We are now prepared to occupy and defend the most advanced position, namely, that without waiting for bacteriological confirmation of diagnosis, every patient who presents clinical evidence of diphtheria should at once receive a "curative dose" of serum, and all children of the household should be immunized by the same agent. Adults should be immunized if likely to be much exposed, and may be immunized, if they desire it, even if not specially exposed.

It is of the highest importance to have a trustworthy serum, of as high potency as possible, so that a dose small in bulk shall be large in antitoxic units.

For a child of three years, the initial dose in a tonsillar case of moderate severity seen early should be 1000 to 1500 units; in nasal or laryngeal cases, or in cases in which the lower pharynx is invaded, or severe cases of any variety, the dose should be 2000 units; and in any case first seen as late as the fourth day, the dose should be 2000 to 3000 units. The injection should be repeated in from twelve to twenty-four hours, according to circumstances. For immunizing, 500 units should be the dose; or if infection and incubation be suspected, the curative dose of 1000 units should be given at once.

What is needed is promptness and courage in the use of the remedy. If *The Polyclinic* has by its former caution contributed in any degree to the hesitation with which some members of the profession resort to the use of antitoxin, we trust that this article will make amends and inspire the doubters with decision and boldness.—*Philadelphia Polyclinic.*

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

EDITORIAL.

DR. MAYS (*Polyclinic*) controls the night sweats of phthisis with atropine sulphate 1-960 grain four times daily.

THE Chief of our Experimental Department states emphatically that whoever once tests our Euformol with reference to its deodorizing power will be convinced of its value. It does not act by displacing one odor with another, as is the case with ethereal oils, perfumes, and many so-called disinfectants, but it acts by chemically combining with and destroying the sulphuretted hydrogen, mercaptane, skatol, ammonia bases, and other offensive compounds.

WE DO NOT so label or advertise our products as to encourage, or admit of, their use by the public without the advice of the physician. Any physician who has seen a former patient purchase for himself, and without a doctor's advice, a remedy labeled with the disease which it is designed to cure or alleviate, with full directions as to dose, etc., and which he himself has prescribed on a previous occasion, will appreciate the bearing of this principle upon his purse and reputation.

FOR SOME YEARS we followed the lead of Podwissotsky and assayed ergot extracts for sclerotic or ergotinic acid, as most manufacturers do to-day. We now know as the result of our own experiments upon animals that ergotinic or sclerotic acid is not only not the active principle of ergot, but that it is harmful when injected because it depresses the nerve centers and exerts no hemostatic influence. We have also found that the determination of resin in Cannabis Indica, and extractive in digitalis, is absolutely useless in so far as it serves as an indication of the activity of these drugs.

DR. J. C. WELCH, Bellevue, Allegheny county, Pennsylvania, is the possessor of an excellent microscope. He recently had occasion to examine our Egg Emulsion of Cod-liver Oil under his strongest lens. The Emulsion showed so fine a division of the oil globules that some of them were scarcely visible under the lens, the biggest globules being no larger than pin-heads, and the entire field assuming a granular appearance.

Examined at the same time the globules of another widely advertised Emulsion were found only about one-fourth as numerous, varying from the size of a pinhead to that of a buckshot, the average being five times as great as the average size of the globules in our Egg Emulsion.

IT MAY NOT be generally known that the high potency Antidiphtheritic Serum or antitoxin which is now offered by us is purely the natural serum as it is obtained from the blood of the horse. We have brought our methods of immunization to so high a degree of perfection that it is safe to say no other antitoxin is in a condition to invite more exacting and crucial tests respecting its power.

The containers or glass bulbs in which the Antidiphtheritic Serum is hermetically enclosed are themselves a practical application of modern antiseptic methods. The glass bulb is thoroughly sterilized before being filled with the serum, and is immediately closed by blowpipe after receiving its contents—the whole operation being conducted in an atmosphere

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of filtered sterilized air. The neck is very easily broken off when the serum is desired for use.

DR. ARTHUR M. CORWIN, of 34 Washington Street, Chicago, Demonstrator of Physical Diagnosis at Rush Medical College, writes as follows of our Egg Emulsion, under date of May 26, 1898:

"I have employed it in several properly selected cases and prescribed it quite extensively in addition, and in every instance have been more than pleased with its action. Latterly I had well-nigh ceased prescribing cod-liver oil in any form. But in this combination it is not only a stable emulsion, but it is surprisingly palatable, easily assimilable, and possesses the stimulating properties of alcohol usually indicated where the oil is a desideratum. I believe it is the best preparation of Cod-liver Oil upon the market, and the profession owes Parke, Davis & Co. a vote of thanks for placing it there."

THE RESPONSIBILITY CANNOT BE SHIFTED.

We confess frankly that we should benefit enormously if the medical profession were to cultivate more generally the habit of specifying on their prescriptions the brand or "make" of the medicinal preparations which they desire to have dispensed. But great as would be our own gain, it would be completely overshadowed by the immense profit accruing to the physician and his patients, for it would do a world of good in securing for both remedial agents of certain, positive and uniform power and efficacy. The "specifying" physician benefits himself and his patients immeasurably more than he benefits his favorite manufacturer. He thus excludes all doubt about the quality of his medicines, and to the harassing uncertainties of diagnosis, treatment and attendance he, at least, does not add the greatest of all misgivings—are the remedies administered active or inert? In every one of life's important callings, the worker selects and tries his own tools. Are not drugs the principal implements of the doctor's craft, and should their selection be left to any one save him who bears the heavy responsibility?

"Poor Drugs, Poor Results, Poor Reputation, Poor Practise!"

What do you think about it? Pray favor us with your views.

CHRONIC INTESTINAL INDIGESTION IN CHILDREN.

From a paper read before the Northwestern Medical and Surgical Society of New York (March 16, 1898), by Dr. S. Henry Dessau, we glean some valuable information.

With regard to the treatment of chronic intestinal indigestion Dr. Dessau informs us that much more importance attaches to the management of the diet than to the medicines which may be prescribed. He says: "The diet therefore should first be regulated. These children should not be allowed, except in the most limited quantity, any of the starchy foods, such as potatoes, corn, rice, and the breakfast cereals." This would be hard treatment to carry out faithfully did not the Doctor go on further to sanction the use of such foods when an amylolytic ferment such as Taka-Diastase has been previously added.

Taka-Diastase is the strongest agent known to science for the digestion of carbohydrates or starchy foods. Write for our literature on the subject.

WHAT HYPODERMATIC TABLETS OUGHT TO BE.

Absolutely correct in dose.

Well-formed and firm enough to resist ordinary handling.

Rapidly soluble.

Absolutely pure and irreproachable, in respect to their ingredients.

Prepared with a diluent incapable of doing the slightest mischief.

All hypodermatic tablets *ought* to possess these features—our tablets *do* possess them.

We cheerfully send samples.

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SUMMER DIARRHEA.

Good digestion coupled with good hygiene forms the key-note to the treatment of this condition in infants and young children. To secure the former an entire change of food is occasionally desirable. If, however, the food contains starch, Taka-Diastase should be added to it in order to insure its thorough digestion.

A good food at this time is barley-water with the milk; or a teaspoonful of barley-flour with a grain or two of Taka-Diastase may be rubbed smooth in a little water and added to the diluted milk with good results.

Water that has been sterilized—boiled and then cooled—should be given freely. The child's mouth should be wiped out after each feeding with the nurse's finger wrapped in absorbent cotton and soaked in a solution of Euthymol one part to three of sterilized water.

If the diarrhea is associated with colic and the child is suffering, it is well to start out with a small dose of Chlor-Anodyne—the pain will disappear as if by magic and the convalescence be almost assured.

VOMITING OF PREGNANCY.

An unexpected property of Taka-Diastase, the new starch digestant, has very recently been developed. We have had several physicians report to us from widely separated fields the very unexpected and gratifying success they have experienced during their administration of Taka-Diastase in cases of amylaceous indigestion complicated with the vomiting of pregnancy. Taka-Diastase in no instance was prescribed originally for the vomiting, but for the relief of the starch indigestion and its symptoms. The patients and prescribers alike were more than agreeably surprised at the double relief. We are assured that Taka-Diastase will be prescribed by these physicians for the amelioration of all their cases of vomiting of pregnancy in future. We submit the substance of these statements, which came to us unsolicited from the various writers. We know how intractable is vomiting of this kind, and we shall only be too glad to learn whether further employment of Taka-Diastase substantiates the statements we have thus far received, and which we publish without indorsement pending the accumulation of further evidence.

THE DIGESTION OF ALBUMINOIDS.

Although the digestion of albuminoid substances or the proteids, such as meat fibrin, egg albumen, casein of milk, etc., is accomplished ordinarily with much less difficulty than that of the carbohydrates or starch foods, yet it is not by any means rare to meet cases where some assistance to the assimilation of that class of foods is required.

Physicians, for instance, have frequent need to order a milk diet for their patients under certain conditions. It comes very hard with these patients (if they have a dislike for milk) to digest it properly, since their dislike may have a physiological basis in lack of digestive power. It is here that an aromatic digestive aid like PEPSIN CORDIAL will accomplish much good. Even infants will frequently receive benefit from an assistance such as PEPSIN CORDIAL can give. The milk may be at fault through some temporary nerve-depressing experience of the mother, and "it does not agree" with the child—the milk may pass through the intestinal canal in undigested curd. A few doses of PEPSIN CORDIAL will tide over such a condition of affairs very satisfactorily; it will assist digestion of the milk until the normal conditions again prevail.

The same holds true with regard to the other albuminoid substances. It is not uncommon to find the lives of patients depending upon the absorption (or digestion) of a mouthful or so of scraped beef, custard, or some similar proteid. It is all they will eat or can eat, and at times convalescence is only brought about, the balance turned, by a little aid to the digestion of that particular class of food such as can be given by a reliable preparation of pepsin. Parke, Davis & Co.'s

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PEPSIN CORDIAL is a guaranteed, reliable and active preparation of that article. One teaspoonful will completely digest 3000 grains of coagulated and disintegrated egg albumen.

VERY SIGNIFICANT PERCENTAGES.

A clinching demonstration of the absolute necessity of standardized preparations is afforded by a few extracts from the records of our Analytical Department. These serve admirably to exhibit the wide variation in the percentage of active constituents contained in successive lots of crude drugs:

Calabar Bean.—Physostigmine found to vary from 0.16 to 0.3 per cent.

Cantharides. — Cantharidin found to vary from 1 to 4 per cent.

Cinchona Calisaya. — Total alkaloids found to vary from 3.5 to 10 per cent.

Colchicum Root.—Colchicine found to vary from 0.3 to 0.6 per cent.

Hyoscyamus. — Hyoscyamine found to vary from 0.7 to 0.13 per cent.

Male-Fern.—Filicic acid found to vary from 0.22 to 0.65 per cent.

Nux Vomica.—Brucine and strychnine found to vary from 2.5 to 3.5 per cent.

What uniformity of action can be expected from fluid extracts made in the ordinary way, when the percentage of active constituents varies oftentimes from one to fourfold? A tincture from one lot of drug might easily be as strong as a fluid extract made from another!

THE DECIMAL POINT.

We have always been happy in the thought that the only real difference between Chauncey Depew and ourselves was a decimal point! In fact, the banks recognize this also, and so does our groceryman and butcher.

Now, Parke, Davis & Co. come out with a postal that deals entirely with the decimal point. On this postal we have the mortality from typhoid fever treated according to orthodox methods—that is, methods that can be philosophized over, argued through, clearly understood. And, on the same postal, they have the "effrontery" to put the mortality of this disease when treated according to the Woodbridge method—"that awful method," that "unscientific method." They do not make much of a showing, side by side; there is not enough difference between them—only a decimal point, that's all! The first gives a mortality, according to acceptable authority, of 17.56, while the latter is 1.75, that's all. —*Practical Medicine.*

TETANUS ANTITOXIN.

A case of traumatic tetanus terminating favorably and treated with Parke, Davis & Co.'s Antitetanic Serum is reported by Dr. Hugh F. McGaughey in a paper read before the Winona County Medical Society (Minn.) July 6, 1897 (*Journal of the American Medical Association*). The number of cases treated with this new addition to the physician's armamentarium is being slowly enlarged, but the consensus of opinion is now very decidedly in its favor. The percentage of deaths is already notably less, and as this fact alone will settle the fate of the remedy every such increase in the total number of cases reported should be welcomed and made note of.

SERUM TREATMENT OF PUERPERAL SEPTICEMIA.

An interesting case of puerperal septicemia is reported by Dr. C. E. Brack in the *Journal of the Alumni Association of the College of Physicians and Surgeons*, Baltimore, April, 1898. Microscopic examination of uterine discharges showed streptococci in abundance. Temperature fluctuated between 101° and 102.5°; pulse 120 to 130. Lochia were scant, and had marked disagreeable odor. With the thorough curettement of the uterus and the usual antiseptic local treatment no improvement was made, however, in symptoms until antistreptococcus serum was administered. Altogether four injections were given—"the patient's condition improved after each injection."

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REPORTS.

Puerperal Fever Cured by Antistreptococcic Serum.

Recently used your Antistreptococcic Serum in puerperal fever with marked benefit. The improvement was prompt and lasting, immediately following the use of the Serum.—O. FORDYCE, M.D., Guthrie Center, Ia.

A Source of Confidence.

In these times of cut-rate pharmacy it is a great satisfaction to know that "P., D. & Co." insures pure drugs and accurate dosage.—HUBERT L. SPENCE, M.D., Associate Editor *Cleveland Journal of Medicine.*

An Excellent Corrective of Anal Pruritus.

I have used the Euthymol Cream in two cases of obstinate anal pruritus, and thus far the results have been excellent. The intolerable itching is dispelled by the application of the cream and the patients express great relief from its use.—DR. WALTER KEMPSTER, Milwaukee.

In Chronic Bronchitis.

I have prescribed your Creosote Compound Soluble Elastic Capsules (De Witt) with good results, particularly in a case of chronic bronchitis complicating emphysema, the paroxysms being lessened in intensity and frequency.—LEVEN GRAY, M.D., 421 Graham Street, Pittsburg, Pa., April 1, 1898.

Liquor Sedans in Ovaritis.

A lady who had been suffering from ovaritis and endometritis, and had been confined to her bed and under the care of an able physician, came under my care some time since. She had given up all hope of recovery. I put her on Liquor Sedans: she is now up and says she is enjoying better health than she has before in seven years.—J. F. STODDARD, M.D., Wares, S. C.

Severe Membranous Croup.

After a somewhat extended experience with your Antitoxin I have found it universally reliable. I have but recently treated a case of membranous croup of severe type, in which the clinical symptoms were so well marked that there was no question of error in diagnosis, with the happiest results, thus not only proving the efficiency of antitoxin in this disease, but demonstrating the reliability of your preparation.—W. H. OLDS, M.D., Spokane, Wash.

Indigestion and Constipation.

Mrs. B——, aged 35, mother of three children, had suffered for years with indigestion and constipation. Her symptoms were aggravated by vegetable diet. Slight exercise caused fatigue; headaches; constant neuralgic symptoms, also occasional fainting spells; excess of uric acid and anemic murmur of the heart; pain on pressure of abdomen and slight borborygmus. Ordered calomel and soda, and Cascara Sagrada (P., D. & Co.) four times a day, and Taka-Diastase four grains after each meal. Patient has improved immensely, and I must say Taka-Diastase has made her a new woman in spirits and feelings.—J. FRANK THORNTON, A.M., M.D., Plum, Texas.

For Receding and Sensitive Gums.

Some time ago I received a small tube of Euthymol Tooth Paste, which upon trial proved to be the best dentifrice for my use that I had ever tried. For some years the gums had shown a tendency to recede, and became sensitive, and I have used many things. Something like the Biblical Asa, I suffered much at the hands of many physicians (dentists) and grew nothing better, but rather grew worse, until "Euthymol Tooth Paste" was tried; this has brought genuine relief and comfort. Certainly, for my own use, it is the best thing of the kind I have ever used. I have had occasion to use Euthymol several times in my practise, and am much pleased with it.—DR. WALTER KEMPSTER, Milwaukee.

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GLEANINGS.

One Suppository in Each Tube.—We now furnish our popular Glycerin Suppositories in glass tubes, one dozen tubes in each box.

Its Formula Explains Its Usefulness.—Each fluidounce of our Elixir Kola Compound represents 40 grains each of Kola Nut, Celery Seed, and Coca. As a tonic and invigorant, this elixir forms one of the best preparations of Kola at the command of the profession.

Taka-Diastase, discovered by Takamine, a Japanese chemist, is, in my opinion, one of the best, if not the very best, therapeutical remedies known in the treatment of so-called amylaceous dyspepsia, and I could hardly exaggerate the good results I have had with this remedy.—DR. HERMANN L. ARMSTRONG, in *New York Medical Journal.*

Duty and Interest Both Require It.—On the selfish basis of professional success, on the sacred basis of the care of human life, with all that its loss means, let us see to it that our medicines are as pure and capable for the combating of disease as are the appliances used by the surgeon, who is better off in that he can watch their effects every second and see the area he is operating upon.—Editorial in *Journal of the American Medical Association.*

Are you prescribing yourself out of practise? In other words, do you habitually prescribe proprietary medicines? If so, you are placing a premium on self-medication amongst the laity. The patient receiving an "original package" of the medicine observes the name, reads the accompanying circulars, and is thenceforth content to do his own doctoring. Nay, more, he sees at once the opportunity of becoming a public benefactor, and generously imparts his medical wisdom to his friends on all occasions. The bane of medical practise is the proprietary evil, and it is rendered doubly disastrous by the sanction it receives from its very victims.

Health for the Teeth.—The teeth should be taken good care of whether they are "native or acquired." It is only applying the same principles of cleanliness to them that we now recognize as necessary in other lines of social and domestic economy.

If the teeth receive the attention they ought to have, it must be through the use of a tooth-cleansing and disinfecting preparation which, combining these qualities, is also pleasing and agreeable to the user. This last point is essential, for no matter how strongly detergent nor how satisfactory a germicide the preparation might otherwise be, if it should be considered *non res grata*, distasteful in any way, it could only lead finally to perfunctory attention to this part of the toilet or to its total neglect.

EUTHYMOL TOOTH PASTE will be found to be an ideal preparation for the hygienic care of the teeth. It is an excellent detergent, an undoubted antiseptic, and, moreover, pleasant to use.

Inferiority of "Green Extracts."—Messrs. Farr and Wright have recently reported to the Pharmaceutical Society in London that such of the official extracts as are made from the juices of green drug are decidedly inferior to extracts made by percolation of the dried drug with an alcoholic menstruum. [The extracts of the B. P. made from juices of green drug are, we believe, aconite, belladonna, conium, and hyoscyamus.—ED.] After pressing green aconite, for instance, more aconitine is found in the marc than in the juice. Again, extracts made from juices are loaded with inert matter that alcohol, were it used as a menstruum, would not extract. It came up afterward during the discussion that "green extracts" were introduced in the British Pharmacopœia at a time when alkaloidal standardization had not become known.

The crust of English conservatism will probably be pierced in this spot before the century closes, however, and "green extracts" will then cease to be.—*Bulletin of Pharmacy.*

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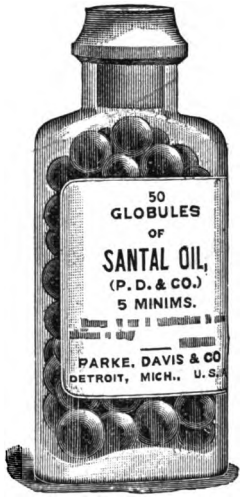
It is next to impossible to purchase an absolutely pure Oil of Santal. **We import the sandalwood and distil the oil in our own laboratory.** There can, therefore, be no question concerning the purity of

Globules of Santal Oil

(P., D. & CO.).



Another point: Please notice the label. Nothing thereon concerning the therapeutic properties of Santal Oil which would serve to place the remedy within the reach of the laity—strictly ethical.

Please specify

Globules of Santal Oil (P., D. & Co.).

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Home Offices and Laboratories, Detroit, Michigan.
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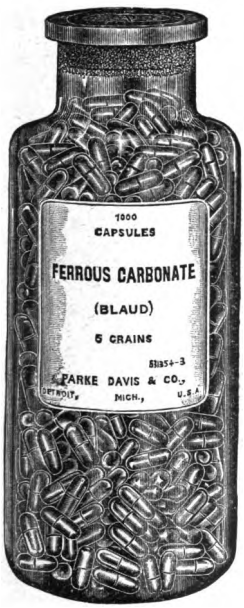

A New Method but an Old Remedy.

BLAUD'S MASS has been before the profession too long to require any comment here as to its efficiency wherever indicated. It is so easy, however, to go from ferrous carbonate to ferric oxide that a certain lack of confidence in Blaud's pills has all along been more or less manifest.

We have now, however, a process for producing ferrous carbonate in fine granular form, and it will remain permanent so long as it is protected from atmospheric influences. This we accomplish by encasing in capsules, five grains each.

CAPSULES FERROUS CARBONATE (Blaud), P., D. & CO., MAY BE IMPLICITLY RELIED UPON.

We will send samples, and explain more in detail, upon request.

PARKE, DAVIS & COMPANY,

Detroit, New York, Kansas City, Baltimore, New Orleans, U. S. A.
London, Eng., and Walkerville, Ont.

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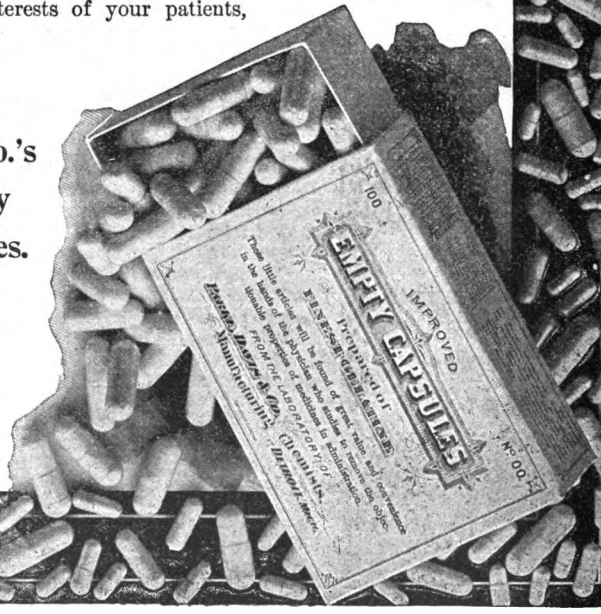
PARKE, DAVIS & CO.'S

Empty Gelatin Capsules

ARE THE BEST.

They are pliable—not brittle—and perfectly soluble. Caps and bodies fit; no waste of capsules, no waste of drug. No softening during warm weather, no disagreeable smell, no obnoxious taste, no air-holes, no discoloration. Cheap gelatin and cheap labor make cheap capsules; skilled labor and superior gelatin make P., D. & Co. capsules. When directing your prescriptions put up in Capsules, we believe you will find it to your own interest, as well as ours, also to the interests of your patients, to say:

Use P.D.&Co.'s Empty Capsules.



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Treatment of Typhoid Fever BY Dr. Woodbridge's Method.

Dr. H. C. Yarrow, writing in the November, 1897, number of the *National Medical Review*, concludes an article entitled "Intestinal Antisepsis and the Woodbridge Treatment," as follows:

"Did space permit I should be glad to give a record of various cases that I have treated with intestinal antiseptics, but being limited I cannot now do so. I may say, however, that under the antiseptic plan of treatment advocated by Dr. Woodbridge, I expect, and have found, that my patients' temperatures become normal between the tenth and twelfth days, and since I have pursued this special plan of treatment I have had no unfortunate complications, no anxieties, and no deaths."

Dr. S. Solis-Cohen, in the *Philadelphia Polyclinic* for December 4th, 1897, stated as follows:

"After the 'calomel stool,' intestinal disinfectants may be usefully employed. These may not kill Eberth's bacillus, nor neutralize its toxins, nor chase after it into the spleen or cerebrum; but they do render the patient's intestine a less favorable breeding ground for this organism, and its many named and unnamed congeners; they do diminish the formation and hence the absorption of various named and unnamed toxins; they do render the course of the case less severe. I affirm this unhesitatingly, as the result of a sufficient clinical study."

Literature on Application.

Parke, Davis & Company,

HOME OFFICES AND LABORATORIES, DETROIT, MICH.
Branches in New York, Kansas City, Baltimore, and New Orleans.

Taka-Diastase

is unquestionably *the* remedy where dyspeptics are suffering from inability of the digestive organs to convert starchy foods into sugars, and this is acknowledged to be the cause of *three-fourths* ($\frac{3}{4}$) of all the cases of dyspepsia.

Make the following test and be convinced:

To a small bowl of well cooked starch jelly add the contents of a capsule of Taka-Diastase; stir, and at intervals of one minute place a drop of the digesting starch on a white plate, add a drop of dilute Iodine solution, and spread on the plate with the finger tip. The beautiful play of colors from greenish-blue through blue-violet, violet, brownish-violet to yellow indicates the successive conversion of the starch into soluble-starch, into dextrins, into malt sugar.

PARKE, DAVIS & CO., Home Offices and Laboratories, Detroit, Mich.
Branches in New York, Kansas City, Baltimore, and New Orleans, U. S. A.

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Continue to ask for Parke, Davis & Co.'s Anti-Diphtheritic Serum. We continue to lead in potency, efficiency and reliability of product. Remember also that P., D. & Co.'s serum is marketed in hermetically sealed bulbs (not ordinary vials and corks), which exclude the air and keep the serum strictly aseptic.

Latest literature mailed upon request.

Special Notice.—The validity of the recent patent issued by the U. S. Patent Office on diphtheria antitoxin will be contested in the courts. Pending a decision in the case, we beg to announce that we shall, at our own expense, protect and defend physicians in any legal proceedings which may be brought as a result of the purchase of "P., D. & Co.'s" Anti-Diphtheritic Serum. Order it at any time and in any quantity without hesitation.

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Therapeutic Notes

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Ergot Aseptic.

THE IDEAL PREPARATION OF ERGOT FOR HYPODERMATIC ADMINISTRATION.

EXTRACTIVE matter is inert and causes abscesses. Ergotinic acid is a nerve depressant and irritant. Aside from being entirely free from both extractive matter and ergotinic acid, Ergot Aseptic is Physiologically Tested, Standardized, and Sterilized.

Put up in hermetically-sealed glass bulbs, which exclude all germs or other contaminating substances. No necessity therefore for alcohol, glycerin, salicylic acid, or other preservative, which might prove irritating. Each bulb contains one cubic centimeter, representing two grammes of standard Ergot. It is very rapid and powerful in its effects, producing strong uterine contractions within a surprisingly short time.

LITERATURE UPON REQUEST.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.
Branches in New York, Kansas City, Baltimore, and New Orleans.

Taka-Diastase

is unquestionably *the* remedy where dyspeptics are suffering from inability of the digestive organs to convert starchy foods into sugars, and this is acknowledged to be

The cause of 3/4 of all the Cases of Dyspepsia.

Taka-Diastase will convert one hundred times its weight of starch into sugars in ten minutes under proper conditions, **and many times that quantity during the ordinary digestive period following each meal.**

Satisfy yourself that this is true by making the following test. It is both interesting and convincing:

To a small bowl of well cooked starch jelly add the contents of a capsule of Taka-Diastase; stir, and at intervals of one minute place a drop of the digesting starch on a white plate, add a drop of dilute Iodine solution, and spread on the plate with the finger-tip. The beautiful play of colors from greenish-blue through blue-violet, violet, brownish violet to yellow indicates the successive conversion of the starch into soluble-starch, into dextrins, into malt sugar.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.
Branches in New York, Kansas City, Baltimore, and New Orleans.

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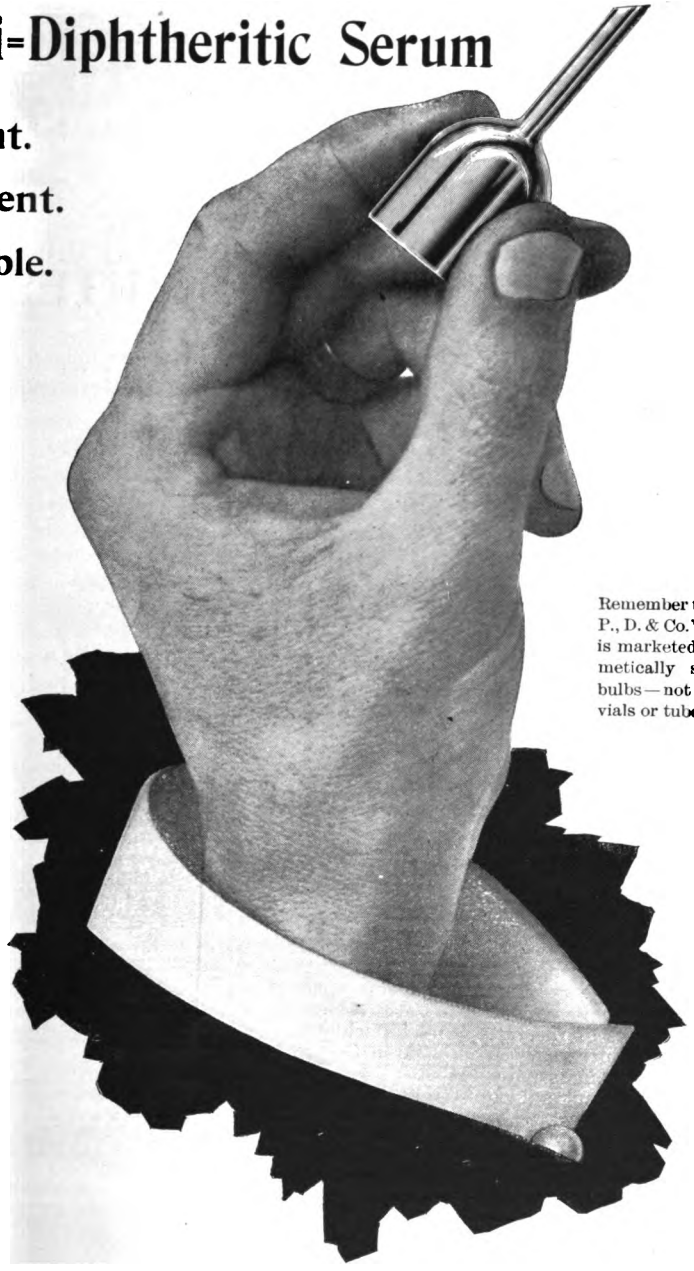
PARKE, DAVIS & CO.'S

Anti-Diphtheritic Serum

Potent.

Efficient.

Reliable.



Remember too that P., D. & Co.'s serum is marketed in hermetically sealed bulbs—not corked vials or tubes.

SPECIAL NOTICE.—The validity of the recent patent issued by the U. S. Patent Office on diphtheria antitoxin will be contested in the courts. Pending a decision in the case, we beg to announce that we shall, at our own expense, protect and defend pharmacists and physicians in any legal proceedings which may be brought as a result of the purchase, sale or use of "P., D. & Co.'s" Anti-Diphtheritic Serum. Order it at any time and in any quantity without hesitation.

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IN the debilitated conditions to which hypophosphites are especially applicable, such as anemias, senile bronchitis, malignant cachexias, particularly where there is depraved nutrition, malassimilation, and nervous debility,

SYRUP HEMATIC
HYPOPHOSPHITES

will be found a valuable preparation. Particularly is it applicable to those conditions where general toning of the economy seems desirable.

FOR COUGHS AND COLDS.

FORMULA.

EACH FLUIDOUNCE REPRESENTS:

White pine bark	30 grains.
Wild cherry	30 grains.
Sassafras	2 grains.
Sanguinaria	3½ grains.
Balsam poplar buds	4 grains.
Chloroform	4 minims.
Spikenard root	4 grains.
Morphine acetate	3-16 grain.

Dose—½ to 2 teaspoonfuls (2 to 8 Cc.) every three hours.

This union of astringents, sedatives and stimulating expectorants will commend itself as a convenient resource in the treatment of affections of the throat and bronchial passages; particularly serviceable in the treatment of coughs and colds.

The irritant and expectorant properties of sanguinaria are very happily conjoined with the astringents which have the power of contracting mucous exudations, thereby loosening them from the membranes.

The sedative and antispasmodic properties of chloroform, morphine and wild cherry here find useful application, enabling the preparation to be used in a large variety of affections.

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Therapeutic Notes

FIFTH YEAR. DETROIT, MICH., DECEMBER, 1898. No. 3.

THERAPEUTICS.

SEPTIC INTOXICATION OF FIVE WEEKS' DURATION TREATED WITH ANTISTREPTOCOCCIC SERUM; RECOVERY.

BY R. A. BOWIE, M. D., M. R. C. S. ENG., L.R.C.P. LONDON, BROCKVILLE, ONT.

Dr. Bowie describes in the *Montreal Medical Journal* a protracted operation performed for the purpose of fixing in position a wandering right kidney and of extracting from the gall-bladder a calculus of the size of a marble. The patient rallied nicely, but on the fourth day an abscess was detected at a stitch in the lower part of the wound. Though every resource and expedient was brought to bear, the symptoms of septic intoxication persisted for *five weeks*. Dr. Bowie continues:

"The loss of flesh was very pronounced, and as my resources were exhausted, I decided to test the efficacy of serum therapy. I communicated with Parke, Davis & Co., at Detroit, and promptly received a fresh preparation of their Antistreptococcic Serum. I injected ten cubic centimeters under the left mamma.

"Fourteen hours after the injection she voluntarily expressed herself as feeling much better than she had felt for days, and the quantity of pus had decreased materially. Eighteen hours after the first injection I gave a second ten cubic centimeters, and on this occasion a slight reaction occurred three hours later, the temperature rising 1.2°, and the pulse from 116 to 124. Both subsided gradually, and twenty hours after the second injection the temperature touched normal for the first time in thirty-eight days. The wound had almost ceased secreting pus, and the granulations were rapidly filling in what had been a gaping cavity in the abdominal wall.

"From this period the patient's convalescence proceeded in leaps and bounds, and the cadaverous, hollow-eyed, perspiring wreck became imbued with new life and vigor; she gained flesh rapidly and her craving for food could hardly be satisfied.

"The patient, whose wound had entirely closed fourteen days after the administration of the serum, is now, three and a half months since the operation, doing her own housework; she feels well and strong and has more than regained her weight. Upon examination I can find no evidence of any displacement of the refractory kidney.

"This report I have thought well to publish as being of interest to those who have been worried, and may again be, by similar cases, and as offering them a measure of assistance which has proved beneficial to my patient and grateful to myself."

***

Dr. H. S. Belt, of South Boston, Va., favors us with a description of a case of septicemia following childbirth, very successfully treated with Antistreptococcic Serum, Parke, Davis & Co. Fourteen days after childbirth the attack came on with a severe chill, temperature mounting to 107° F., and there remaining for about three days, with little if any intermission, despite the use of every known remedy. Twelve cubic centimeters antistreptococcic serum was then injected. At the end of twelve hours the temperature was reduced to 103.5°; patient comfortable. Sixteen centimeters was then given, and caused the temperature to decline gradually; in forty-eight hours it touched

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normal and never again rose above it. Recovery was rapid and uninterrupted, barring the transient appearance of slight bullæ on the skin.

JAMBUL IN DIABETES MELLITUS.

BY WM. PIPER, M.D., BELLAIRE, O.

In the latter part of May, 1897, I was taken with a severe attack of diabetes mellitus, sugar being found in the urine in large quantities, as shown by frequent tests; there were extreme pains in liver, stomach, and bowels, attended with loss of appetite and rapid loss of flesh, and other symptoms as described by the leading authors and text-books. After having consulted some of the leading physicians of the State and taken treatment for five or six months, there was but very little improvement in my condition. During this time I observed closely the diet recommended in this disease. I might here add that for four or five weeks of this time I lived almost exclusively on a wild game diet, which gave satisfactory results for the time being; I also tried the morphine and codeine treatment, which somewhat lessened the amount of sugar secreted, but never caused it to entirely disappear.

Throughout these several lines of treatment I was using tonics and reconstructives as suggested by medical friends and journals, from which I derived some improvement in my general condition. The obstinacy of the disease seemed to baffle all treatment.

Being advised by my son, Dr. Wm. O. S. Piper, to try powdered jambul seeds in five- to ten-grain doses three times a day, I accordingly procured an ounce bottle from Parke, Davis & Co. through a Pittsburg drug firm; after using it for three days I found to my surprise a marked decrease in the amount of sugar secreted. I continued the use of it for about three months regularly, and occasionally up to the present time. There was a gradual decrease in the sugar secretion, as shown by the tests at frequent intervals. The last one, made some few days ago, revealed no sugar whatever, and I am feeling almost as well as before the attack.

I am confident that I owe my recovery almost entirely to the jambul seeds. I am now using ordinary diet without any return of the sugar.

I do not advocate the entire cutting off of the farinaceous diet, believing from my own experience that this is not absolutely necessary. Sugar is an essential element in the formation of animal tissue. So with a reliable curative agent (which we no doubt have in jambul seeds) we are at liberty to give larger scope and wider range to our dietary.

July 5, 1898.

FORTY-SEVEN SERUM-TREATED CASES OF DIPHTHERIA; NO DEATHS.

BY BENJAMIN F. HARDING, M.D., MANSFIELD, OHIO.

In February, 1896, I first witnessed the administration of antitoxin. Since then I have administered antitoxin in forty-seven cases, without a death.

I believe that in diphtheria antitoxin we have a remedy superior to any other treatment, and I hold, with Loomis and Thompson, that "the power of antitoxin to neutralize the poisonous effects of diphtheria toxin is an absolute fact."

The effect of the serum upon the disease is so prompt that the family of the patient is often disposed to doubt the diagnosis, although delighted with the improvement.

Results are obtained in from two to eight hours. The unpleasant symptoms alleged to follow the use of serum are few. In three cases erythema ensued in a mild form. Antidiphtheritic Serum is perfectly harmless, whether used as an immunizing or a curative agent.

I have never had to use a second injection where I have seen the case early. I believe in using a strength that will yield the results, without repeating the dose.

An important factor in its use is the purity of the serum. Some of the East-

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ern journals mention the foreign brands. I began with the use of Parke, Davis & Co.'s Antitoxin, and I do not care to give up "an old friend for a new." The results following the use of American serum, according to statistics, are better than those cited in the reports appearing in foreign journals.

If the serum be used early, very little constitutional treatment is required, but when needed I depend upon alcohol and strychnine, with small doses of quinine later on. Simple and nutritious diet should be given. Serum should be administered whenever there is doubt about the diagnosis.

121 CASES OF LARYNGEAL DIPHTHERIA.

In his capacity as Laryngologist to the Detroit Poor Commission, Burt Russell Shurly, B.S., M.D., has had an uncommonly rich and varied experience in this category of cases, and in the performance of intubation. He is an enthusiastic believer in antitoxin and was one of the first to use it in this country. From his interesting paper (*Therapeutic Gazette*, December, 1897, p. 806) we quote the following conclusions:

1. Laryngeal diphtheria is particularly contagious in its own particular type; therefore immunize all children of croup age.

2. Hoarseness and laryngeal cough following an exudative tonsillitis are sufficient indications for the administration of antitoxin.

3. In measles or scarlet fever the complication of croup should receive prompt treatment.

4. The earlier in the course of the disease antitoxin is given the more favorable the prognosis becomes.

5. Cases intubated in the comatose state just preceding death will show fifty per cent. of recoveries.

The antitoxin used in all of the 121 cases considered in this article was obtained from the Detroit Board of Health, and bore the label of Parke, Davis & Co.'s Biological Department.

REPREHENSIBLE SECRECY.

[DR. S. SOLIS-COHEN, in *Polyclinic*.]

A medicinal preparation may be secret (*a*) as to its constituents; (*b*) as to the method of manufacture; (*c*) as to the composition of the finished product; or (*d*) as to all of these; and such secrecy may be partial or general. From the standpoint of science or of the interests of the professions of medicine and pharmacy, or of the welfare of humanity, all of these forms of secrecy are to be condemned without qualification. . . . . The composition of the finished product must be fully published whenever possible. Nothing must be concealed by suppression or vague statement. Thus, let us suppose a preparation termed, *e.g.*, "Purgatin," to be described as "representing or containing ten grains of extract of buckthorn to the fluidounce;" while in addition it likewise contains aloin, of which no mention is made. This is objectionable, and even fraudulent, secrecy. Such secrecy exists. Thus one "preparation of cod-liver oil" has had all the oil carefully filtered out, so that it may be devoid of taste, but no hint of this fact is given to the purchaser. These preparations cannot be considered as legitimate.

PNEUMONIA AND BRONCHITIS ABORTED.

In the *Medical World* Frank Lomerson, M.D., Columbus, Ohio, claims to obtain excellent results from the following:

Tincture aconite, 1-5 minim.
Tincture bryonia, 1-10 minim.
Tincture belladonna, 1-10 minim.
Sulphurated antimony, 1-100 grain.
Potassium bichromate, 1-100 grain.

If one tablet be given to a child two to five years old every fifteen minutes until four are taken, and then one every one to three hours, adults in proportion, and "seen early, many cases of beginning pneumonia and bronchitis may be aborted. No other remedy will be needed." Although "made by several of the tablet makers, I prefer the tablet triturate Bronchitis (No. 693) made by Parke, Davis & Co."

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A NUISANCE AND A DANGER.

How to Control Nosebleed in an Emergency.

There is no treatment for this annoying and sometimes dangerous affection of the nasal passages that at all compares to the internal use of a reliable preparation of ergot. We say *reliable* designedly and with emphasis. Our Ergot Aseptic will be found to be reliable for this purpose because it has been tested by us for its hemostatic power in our Physiological Laboratory and approved by our physiological experts as "up to standard." It has been abundantly proved that no ergot can be considered always active and useful until this method of test has been applied to it. Chemistry has so far been unable to distinguish an inert preparation of ergot from one that may be in every respect desirable. Ergot Aseptic, P., D. & Co., is therefore recommended for checking severe nasal hemorrhage.

AMYLOLYTIC FERMENTS.

In an article on this important subject by Wyatt Wingrave,* M.R.C.S. Eng., in the London *Lancet* of May 7, 1898, we are informed of a personal necessity that arose in the writer's experience for a reliable starch digestant. A crucial comparative examination was therefore made of many malt extracts and of Taka-Diastase, the tests being conducted both chemically and clinically.

He summarizes briefly: (1) That TAKA-DIASTASE is the most powerful of the starch or diastatic ferments and the most reliable, since it is more rapid in its action —*i. e.*, "it will convert a larger amount [of starch] in a given time than will any other amylolytic ferment." (2) That TAKA-DIASTASE seems to be less retarded in its digestive action by the presence of the organic acids (butyric, lactic, acetic) and also by tea, coffee, and alcohol, than are saliva and the malt extracts. This is an important point in pyrosis. (3) That all mineral acids, hydrochloric, etc., quickly stop and permanently destroy all diastatic action if allowed sufficient time and if present in sufficient quantities. (4) That TAKA-DIASTASE and malt diastase have, like ptyalin, no action upon cellulose (uncooked starch). All starch food should therefore be cooked to permit of the starch ferment assisting Nature in this function.

*Assistant Surgeon to the Central London Throat and Ear Hospital.

DIGITALIS IN HEART DISEASE.

A valuable study on "The influence of Digitalis on the heart muscle when the drug is administered for a long period of time" is published by Professors Hobart A. Hare and W. M. L. Coplin, both of Jefferson Medical College, in the *Therapeutic Gazette* of December 15, 1897. The purpose of the research was to determine whether the prolonged administration of Digitalis actually increases the development of the heart muscle. Normal liquid Digitalis, Parke, Davis & Co., was administered to pigs night and morning, in ascending doses, for four and a half months, when the pigs were killed, and the hearts microscopically examined. The authors conclude:

"This research would therefore seem to prove that the prolonged use of digitalis is capable of producing cardiac hypertrophy in the normal heart, and if this is the case it is fair to assume that when the drug is given to a man suffering with valvular disease with deficient compensation it must aid materially in inducing compensatory hypertrophy, in addition to any immediate stimulant action which it may exercise in the circulatory apparatus."

CHRONIC ENDOCARDITIS.

BY JOS. M. PATTON, M.D.,
in *Clinical Review.*

According to Fraser the action of strophanthus is mainly on the heart muscle and only slightly on the arteries, which he considers advantageous, as it undoubtedly is under some circumstances. Strophanthus increases the force and duration of the cardiac systole. Its tonic action is slight or altogether wanting, as

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the tonicity of the heart muscle is not maintained after the cessation of the drug, but relapses into its former condition unless improvement in this respect has been obtained through rest, diet, tonic medication, etc., during the period of stimulation by the strophanthus. In the minor degrees of ataxia of the heart exhibited by nervous, irritable, excitable persons, strophanthus is particularly useful. This is especially true of mitral stenosis, in which lesion strophanthus is particularly effective in controlling the distressing palpitation and dyspnea so frequently present. In the more marked ataxia which borders on asystolism, resulting from any lesion whatever, strophanthus is not effective in stimulating the heart to its usual dynamical condition. In some instances strophanthus causes gastric distress and diarrhea. Gastric distress is not so likely to occur if strophanthus be administered in laurel-cherry water. The dose of tincture (P., D. & Co.'s) is from seven to twelve drops. The dose of strophanthin is from $\frac{1}{200}$ to $\frac{1}{60}$ of a grain. The former dose is large enough for hypodermatic use. Strophanthin is as reliable as other alkaloids of its class, and fairly represents the action of the tincture. Strophanthus has been regarded by some as a reliable diuretic, but its action in this regard is decidedly uncertain.

TWENTY-NINE CASES OF DIPHTHERIA WITHOUT A DEATH.

[Editorial in *Clinical Review*, March, 1898.]

We have received a brief report from Dr. G. O. Switzer, of Pentwater, Mich., on the efficiency of antitoxin in diphtheria which is as convincing as, and even more so than, any hospital report lately observed.

Dr. Switzer's cases all occurred under the ordinary circumstances of village practise. Thirty-one cases were treated with antitoxin with two deaths, and fourteen without antitoxin with six deaths, the epidemic lasting from October 1 to December 15, 1897.

This shows a death-rate of a little over 6 per cent. where antitoxin was used, and a little over 42 per cent. where not used, but these figures do not give the real facts, as in both instances where death resulted after antitoxin the patients were *moribund* before the remedy was administered. This would make a showing of twenty-nine cases treated with not a single death, and sixteen cases treated without antitoxin with eight deaths. A mortality of 50 per cent. under the old plan of treatment shows that the epidemic was a very malignant one. Preventive or immunizing treatment was used in thirty-one cases exposed, and in only two of these did diphtheria develop.

With the exception of about 2000 units, all the antitoxin used was from Parke, Davis & Co., of Detroit.

LOCAL TREATMENT OF DIPHTHERIA.

If the case is progressing towards convalescence or is a mild attack when first seen, the use of a mild antiseptic and germicidal solution such as Euthymol may be depended on for local use. If a bad case at the start, then a more energetic germicide is demanded, and this is represented in Loeffler's Solution.

Professor Loeffler, of Greifswald, was the first to suggest this mixture, which is applied as follows: The affected parts are first rubbed thoroughly with a small pledget of dry cotton wound round an applicator bent at a right angle to the handle, or around a dressing forceps; after this has been done, a pledget of absorbent cotton is saturated with the solution and *pressed firmly* against the diphtheritic membrane for ten seconds, the application being immediately repeated, and again within three or four hours. If there is much smarting, follow in a few minutes with a diluted spray of Euthymol.

Loeffler's Solution is prepared after the following formula: Menthol, 10 grammes; Toluene, q. s. to make 36 Cc.; then add Creolin, 2 Cc.; Ferric chlorid solution, 4 Cc.; Alcohol, q. s. ad 100 Cc.

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STUBBORN THINGS ABOUT GERMICIDES—FACTS.

A Comparative Test of P., D. & Co.'s Germicidal Soap With Corrosive Sublimate and Carbolic Acid.

The value of the disinfecting action of our Germicidal Soap is well illustrated in the following tables, which embody the results of a series of experiments made by Prof. F. G. Novy, of the University of Michigan, and Prof. W. M. L. Coplin, of Jefferson Medical College, Philadelphia. The comparison was made with a one-per-cent. solution of the Germicidal Soap—equal to a 1-5000 of mercuric iodide—solution of mercuric chloride 1-1000, and a five-per-cent. solution of carbolic acid. The Germicidal Soap solution was found to destroy the vitality of pus-producing organisms in less than five minutes, whereas solutions of mercuric chloride (1-1000), or even the mercuric iodide alone (1-1000), require from fifteen to sixty minutes respectively to accomplish the same result. That mercuric iodide alone is not so active a disinfectant as when in combination in the Germicidal Soap is explained thus: When neutral soaps are dissolved in water they are gradually decomposed, liberating free alkali. This free alkali, if the proper amount is present, increases the germ-killing power of the mercury salt enormously—five to twenty times. This is due to its hindering the coagulation of albumen by the mercury salt. Without the action of this free alkali the germicide actually shuts itself out from the living protoplasm

One-per-cent. Soap, 1:5000 HgI_2 Mercuric Iodide.

	½ min.	1 min.	2 min.	3 min.	4 min.	5 min.	6 min.	7 min.	8 min.
Bouillon culture anthrax	+	+	—	—	—	—	—	—	—
Bouillon culture staph. pyog. aur	—	—	—	—	—	—	—	—	—
Bouillon culture prodigiosus	—	—	—	—	—	—	—	—	—
Bouillon culture pyocyaneus		—	—	—	—	—	—	—	—
Pus containing staphylococci		+	+	—	—	—	—	—	—

1:1000 Mercuric Chloride.

	1 min.	2 min.	3 min.	4 min.	5 min.	6 min.	7 min.	8 min.
Bouillon culture anthrax	+	+	+	+	+	—	—	—
Bouillon culture staph. pyog. aur	+	+	+	—	—	—	—	—
Bouillon culture prodigiosus	+	+	+	+	—	—	—	—
Bouillon culture pyocyaneus	+	+	+	+	+	+	—	—
Pus containing staphylococci	+	+	+	+	+	+	+	+

Five-per-cent. Solution Carbolic Acid.

	1 min.	2 min.	3 min.	4 min.	5 min.	6 min.	7 min.	8 min.
Bouillon culture anthrax	+	+	+	+	+	+	+	+
Bouillon culture staph. pyog. aur	+	+	+	+	+	+	—	—
Bouillon culture prodigiosus	+	+	+	+	+	—	—	—
Bouillon culture pyocyaneus	+	+	+	+	+	+	+	+
Pus containing staphylococci	+	+	+	—	—	—	—	—

In explanation of the above tables we would say that + indicates growth; —, no growth.

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within the cell-wall of the spores by thickening or coagulating the albuminous exterior. Similarly, and to illustrate this fact, Koch has shown that spores could live for three months in absolute alcohol, although it is well known that all protoplasm is killed instantly by that substance.

Another superiority of Germicidal Soap as compared with other antiseptics lies in the fact that steel and nickel instruments may be exposed to its action at ordinary temperatures or even at steam heat for hours without the slightest injury. It is a lubricant and cleansing agent in one. It is convenient to use, no solutions to make, only *one* material is needed for both disinfecting and cleaning. It supplies the desideratum in scarlet fever as a wash for the exfoliation at once soothing, cleansing, and antiseptic, and with these same properties exerted in parasitic skin diseases it is decidedly a curative agent. We recommend a trial.

Germicidal Soap is colored blue and stamped POISON: first, to prevent accidents from carelessness; second, to limit its use to the professional channels of physician and druggist.

"I CAN'T TAKE COD-LIVER OIL."

This Old Cry Does Not Long Survive a Trial of Our Egg Emulsion.

There are very many patients who refuse to look at pure cod-liver oil, no matter how palatable or fresh the sample may be. There are others who say that they are unable to take any of the ordinary emulsions found upon the market. Here lies the field of usefulness for our Egg Emulsion of Cod-Liver Oil. This is composed *entirely* of digestible materials, not loaded with gums and mucilaginous materials which interfere with digestion. It is agreeably flavored with aromatics and a drop or so of brandy—just enough to give it a savor and make the patient forget the presence of the oil. Recommend it to the next person who says he cannot take cod-liver oil. You will not be disappointed, neither will he.

"THE HAPPIEST OF RESULTS,"

In The Treatment of Pulmonary Tuberculosis.*

Dr. John A. Robison, of Rush Medical College, says that much benefit may be obtained by attention to hygiene and efforts to improve nutrition by food containing the proteids. "But of equal importance to nutrition is a phosphorus-bearing substance called nuclein, an organic phosphorous acid in combination with proteid. In the nucleus of a cell there resides both the nutritive and formative functions. Hence if the nuclei of the cells suffer, the tissue cells will not be fully nourished and developed. As a result all the tissues of the body suffer and hyponutrition is the result. In these cases I have seen the administration of nucleinic acid followed by the happiest of results: the appetite increases; the body weight and strength, the number of red blood-corpuscles and hemoglobin, all increase."

NUCLEIN IN SURGERY.

Dr. C. E. Ide in an extended article in the *New York Medical Journal* of June 25, 1898, claims that nuclein has a great range of usefulness in surgery. He sums up the main points as follows: (1) Nuclein is an agent which will save us the performance of some surgical operations which have been considered necessary in the past; it is an agent which will work to the building up of "conservative surgery." (2) It will fortify the whole system and render its functions normal and active, and put our patient in the best possible condition for operative procedure, and afterward for a speedy and successful convalescence. (3) It builds up the blood, opposes germ life and its products, and saves us the necessity of administering the many remedies which we would rather let alone, because their after-effect is apt to be bad. (4) It acts principally through the blood and nervous system.—*Medicine*, August, 1898.

**North American Practitioner*, June, 1898.

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WOODBRIDGE TREATMENT.

BY J. W. DUNCAN, M.D., ATLANTA, GA.

Being favorably influenced with the combination of remedies suggested by Dr. Woodbridge, I have sought to give them fair and impartial trial, and I am convinced that they possess the accredited merit. I use the tablets as directed, and also flush the bowels with tepid water, one or two quarts, in which has been dissolved one or two drachms of boric acid. After a few days the tablets are discontinued for a day or so, and a five-grain potash powder, combined with digestive ferments, given every four hours, alternating with Woodbridge Capsule No. 3. For weak pulse and heart action, strychnine nitrate, $\frac{1}{48}$ to $\frac{1}{30}$ grain, is given every four hours. If fever increases, the potash powder is omitted, and the tablets continued for a day or two, with the capsules at the same time. Under this treatment there was not a case which failed to show some improvement within the first forty-eight hours, whether the patient was in the first, second or third week of the disease.

EASY TO REVIVE A GOOD REMEDY—CINCHONIDINE DIHYDROBROMATE.

As far back as 1880 cinchonidine dihydrobromate received considerable attention from the medical profession as a blennostatic—that is, as a remedy effecting blennostasis or checking mucous discharges. It is yet one of the official articles of materia medica in the French Codex.

Although for some unknown reason cinchonidine dihydrobromate fell into disuse on this side of the Atlantic, there is evidence that considerable interest is again accorded it, and it gives promise of regaining a prominent place in the treatment of catarrhal conditions.

To supply the desire expressed for a convenient means of exhibiting the remedy we have added to our list Pill No. 865 Blennostatic, containing Cinchonidine dihydrobromate, 3 grains.

AN HONEST NUTRITIVE.

Ordinary beef tea does not start out with the intention of being dishonest. It is made from beef, and the inference in the popular mind is that it too must be nourishing. The mistake lies in the assumption that water is able to dissolve out all that there is in the beef of any value, while all the facts go to show that the opposite is true. The valuable part is insoluble in water, or even in the stomach indeed, unless it be subjected to the influence of a digestive ferment which posseses power to act upon albuminoid substances such as is the beef fibrin.

Pepsin will do this, but the result of the artificial digestion—called a peptone—is bitter and not acceptable to the ordinary palate. Bromelin, a substance found in the pineapple, will also digest the fibrin of meat, and the resulting peptone is just as palatable as the pepsin peptone was unpalatable.

If a beef extract is made that employs the pineapple digestive agent, bromelin, it will not only contain all the usual flavoring salts present in the ordinary beef extract, but it will contain the digested fibrin as well. It will be *an honest nutritive.* Such a preparation is Mosquera's Beef Jelly, for which Parke, Davis & Co. are the sole agents.

BARBER'S ITCH.

The field of usefulness for our Germicidal Soap is rapidly widening. In an epidemic of barber's itch which lately visited Watertown, Ia., it was proved conclusively that our Germicidal Soap was fully equal to the task of controlling and eradicating this troublesome affection. It has of course been long known that the disease is a parasitic one, and it is satisfactory to know that in this instance Germicidal Soap practically fulfilled one of the missions for which theoretically it had been brought into existence. Prevention is better than cure, however. We recommend Germicidal Soap as a preventive. It is an excellent soap for shaving; it forms a good lather, and many now use it for this purpose.

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WHAT IS WANTED IN PRESCRIBING THE HYPOPHOSPHITES?

Not therapeutic information certainly, nor a lot of iridescent testimonials, however flattering, of an unknown formula. The action of the ingredients is sufficiently well known, and what they are capable of accomplishing in correcting functional disorders is well understood. What is wanted from manufacturing pharmacy is that it shall furnish a hypophosphite compound guaranteed by its makers to contain certain definite proportions of iron, quinine, manganese, strychnine, calcium and potassium in organic combination with hypophosphorous acid. The ethical quality of an open formula is wanted; secret preparations are *not* wanted.

Both chemical and clinical test proves our Hematic Hypophosphites to be what we claim for it: every ingredient named is demonstrably present, and the pathological states which are amenable to hypophosphite-therapy yield readily to a course of treatment with it. In addition it is an elegant, clear, permanent syrup, without precipitate. Finally, it is not advertised to the public. Pharmaceutically and ethically considered our Hematic Hypophosphites is perfect. Each fluidounce contains:

Potassium hypophosphite, 1½ grains.
Manganese hypophosphite, 1 grain.
Strychnine hypophosphite, ⅛ grain.
Ferrous hypophosphite, 1¼ grains.
Calcium hypophosphite, 1 grain.
Quinine hypophosphite, 7-16 grain.

MEDICATION INTENDED FOR THE INTESTINES.

There are many substances desirable as medicaments in other respects which either irritate the gastric mucous membrane or they neutralize or impair the action of the digestive secretions. There is yet another class which neither irritate the stomach nor impair digestive function, yet are very much disliked by patients for their nauseating flavor. The nausea induced may so seriously interfere with the appetite as to call for discontinuance of the remedy. Ichthyol and creosote may be taken as types of this class.

We are therefore pleased to notice in the yearly report just issued of the Loomis Sanitarium for Consumptives the successful employment of an Ichthyol 2 grains keratin-coated pill made by us for use in that institution. "Especially in cases showing intestinal complications" was the improvement most marked. As high as ten grains daily was given. No disturbance whatever of the digestion supervened, and the results were satisfactory in respect to increased weight, decrease of expectoration and cough, and also in diminished number or disappearance of bacilli.

A RECONSTRUCTIVE TONIC.

The best stimulant to the tissue-building cells of the human economy, to the protoplasm of the nerve fibers, is one that furnishes the cells their food with the least possible exercise of vital energy. Cod-liver oil has been found to be a stimulant of that nature, a reconstructive tonic as it has been called.

There are persons, though, who cannot take the cod-liver oil in its natural state, no matter how fresh or palatable the particular sample of oil may be—they must have its taste disguised or flavored. An emulsion is the form in which this desire finds expression. The ordinary emulsion, however, contains a large percentage of indigestible gums and gelatinous constituents which are more or less employed for the emulsification of the oil. These substances hamper the process of digestion. An ideal emulsion would be composed of entirely digestible ingredients and therefore much less likely to disturb or disagree with a sensitive stomach. Such a one is our Egg Emulsion of Cod-Liver Oil. The egg used as an emulsifying agent adds to the digestive and medicinal value instead of detracting therefrom.

The acceptability to the palate of Egg Emulsion of Cod-Liver Oil is still further assured by a skilful combination of aromatics in its formula.

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HAMAMELIS IN TYPHOID FEVER.

The fourth point (hemorrhage) seemed to be forestalled by giving a drachm, more or less, of the fluid extract of hamamelis every four hours. About twelve years ago I read an article in the *British Medical Journal*, by Shoemaker of Philadelphia, on "Hamamelis as a Vascular Constringent, etc." I then began to use it in a variety of varicose and hemorrhagic cases, and was so favorably impressed with it that I concluded that its constringent, astringent and tonic properties would be serviceable in typhoid fever as a preventive of hemorrhage, if nothing more. I therefore adopted the following prescription, which was only modified to meet the factors of the personal equation:

℞ Spts. terebinth. rect., 1 drachm.
Spts. juniper, ½ drachm.
Fluid extract hamamelis (P., D. & Co.), 2 ounces.
P. acacia, 1½ ounces.
Aq., q. s. ad 6 ounces.

Sig.: Dessertspoonful every four hours while awake.

All the cases ran a moderate course and seemed to be abbreviated, as compared with my experience for ten years prior. —J. SANDERSON CHRISTISON, M.D., in *Journal of the American Medical Association*, Sept. 17, 1898.

THE ANTITOXIN TREATMENT OF DIPHTHERIA IN DETROIT.

The statistics of nearly two thousand cases of diphtheria treated with and without antitoxin are noticed in an abstract in the *New York Medical Journal* of April 16, 1898, of a paper by Dr. George Suttie, of Detroit, originally appearing in the *Louisville Medical Monthly*.

Briefly summarized the abstract informs us the first series of 841 cases tabulated gave a mortality rate of 12.56 per cent. treated with and 34.90 per cent. treated without antitoxin. The second series of 937 gave a mortality rate of 10.49 per cent. treated with and 30.39 per cent. treated without antitoxin. "The antitoxin employed by the board [of health] has been from the first that of Parke, Davis & Co."

Quoting further from the abstract: "These figures," says Dr. Suttie, "go to show that as experience in its use accumulates, and as both medical men and the public at large see the advantage arising from the use of antitoxin early in the diphtheritic invasion, there is attained a continued and steady improvement in results."

TAKA-DIASTASE.

[Extract from Ringer & Sainsbury's Handbook of Therapeutics, 13th Ed., p. 686.*]

Taka-Diastase.—A new and very active preparation of diastase has been recently introduced under the name of Taka-Diastase. This substance, which is obtained from a species of fungus (*Eurotium oryzæ*) belonging to the Aspergillus family, was discovered by a Japanese chemist, Jokichi Takamine. Taka-Diastase is said to be capable of converting one hundred times its weight of dry starch, whereas the best malt extract is stated to possess not more than the twentieth part of this conversion power. The dose in powder or tabloid form is from 1 to 5 grains. We therefore recommend that Taka-Diastase should, like all other ferments of the class, be administered during the progress of the meal.

"DON'T USE ALCOHOL."

This may be good advice in more ways than one, but we mean it to apply to your hypodermatic syringe. Don't wash it out with alcohol; this dissolves the oil, which keeps the leather packing soft and pliable, and the latter consequently becomes hard and makes an imperfect joint. Wash out preferably with carbolated water. This will answer equally well as an antiseptic and will not shrink and dry the leather packing. Keep the cap on the syringe when not in use—this helps to prevent "drying out" of the packing.

*London: H. K. Lewis.

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THE ONLY POSSIBLE WAY OF GAUGING THE ACTIVITY OF HEART TONICS.

The pharmacist may easily be deceived as to the active qualities of the crude drug digitalis, procured on the market for his preparations, as he cannot rely upon the physical appearances as being the correct criterion of strength, and he has no way of making a chemical assay. The only way he can guarantee that his preparations of the heart tonics are physiologically active is by an actual test on animals, or by a clinical experiment. The former method, of course, should always be employed, as *the reaction of animals to the heart tonics is positive.* — E. M. HOUGHTON, M.D., Lecturer on Experimental Pharmacology, Detroit College of Medicine, in *Therapeutic Gazette.*

***

A representative sample of every parcel of crude digitalis received by us is tested physiologically before it is utilized in the manufacture of pharmaceutical preparations. Samples of the finished products are again examined and subjected to physiological test. All our preparations, containing digitalis, are thus sent out into the market with our positive guarantee of medicinal activity.

A GOOD FORMULA — GIVE IT CREDIT.

We call attention to the fact that we have recently placed upon our price list Chocolate Tablet No. 161 Corrective Infants' (Dr. A. W. Ives):

℞ Mercurous chloride, mild, 1-20 grain.
Powdered ipecac, 1-50 grain.
Sodium bicarbonate, ½ grain.
Bismuth subnitrate, 1 grain.

This formula originated with Dr. A. W. Ives, of Detroit, by whose permission we have added the tablet to our list.*

The value of the formula as a carminative or "corrective" in the bowel troubles of infancy and childhood is evident at a glance. We feel confident that it will receive extensive and hearty indorsement.

Upon the recommendation of Dr. Ives we have incorporated the chocolate and sugar throughout the mass instead of confining it, as is usual, to the outer investment. It is often necessary to crush the tablet into a fine powder in order to place it upon the tongue of an infant or child. The powder is palatable and requires the addition of no other flavoring or sweetening agent.

* Dr. Ives in granting permission stated incidentally that Parke, Davis & Co. were the first house who had had the courtesy to ask his permission to use either his formula or his name.

THE BITTERNESS OF CASCARA SAGRADA.

Elaborate experiments and costly manipulative tests have been from time to time undertaken by Parke, Davis & Co. and other scientific workers with the object of ascertaining to what extent, if any, the bitterness of Cascara Sagrada might represent its therapeutic value. We cannot even attempt to give a condensed summary of these various experiments as they have been reported. We can, however, say that so far it has been satisfactorily proved that the old-time bitter fluid extract is much more effective as a tonic-laxative and cure for constipation than the so-called "tasteless" preparations.

Parke, Davis & Co. still manufacture the fluid extract Cascara Sagrada upon which, on its original introduction by them, the whole therapeutic record of the drug was based, and they unhesitatingly recommend the bitter extract to every physician who wishes to give the drug a *fair* trial. The preparations which have been stripped of the bitter principle do not do justice to the drug.

JOSEPH CLEMENTS, M.D., Kansas City, Mo., contributes to the May number of the *Kansas City Medical Index* an article on "Cratægus Oxyacantha in Angina Pectoris, with Report of Cases." Dr. Clements urges the utmost caution in obtaining the genuine drug. Samples of our thoroughly reliable fluid extract will be furnished on application, to physicians desiring to test this remedy.

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & CO.]

EDITORIAL.

"THE CHALLENGE IS ACCEPTED!"

A Ringing Defiance to Osteopathists and Medical Charlatans.

Wm. M. Warren, the General Manager of Parke, Davis & Co., and the Publisher of the *Medical Age*, has been sued for $25,000 damages by one William Smith, Osteopathist, who claims he has been libeled by the *Age*. Poor Smith! His legal path is not likely to be strewn with roses, if we may judge by the stirring and fiery announcement which appears over Mr. Warren's signature in the *Medical Age* of October 25. We quote the following passages:

"There is no use in blinking the fact that the lack of efficient organization amongst reputable medical men has permitted the whole brood of quacks and charlatans to flourish apace. By the strange irony of fate, Osteopathy. in some respects the most grotesque of medical aberrations, has well illustrated Lecky's famous dictum that a small but cohesive and determined minority can exert a political influence wholly disproportioned to its real weight and numbers.

"In Kentucky, thanks to the resolute leadership of a handful of physicians, ably guided by Dr. Mathews, the osteopaths have been driven from the State. Not so, however, in Missouri or—I blush to say it—in Michigan, Vermont, North Dakota, South Dakota, Illinois, Colorado, and North Carolina. In these more lax and indulgent communities Osteopathy boasts its numerous followers, its "schools of instruction," its periodicals of propaganda, its political influence in legislation, its shameful immunity from the penalties by which society properly seeks to rid itself of quackish parasites.

"Emboldened by its success, Osteopathy now enters the courts and offers battle to a medical journal which disputes its respectability. The challenge is accepted. In the interest of science, in defense of ethical and honorable medicine, in defiance of a quackery that constitutes a deep disgrace to an enlightened age and a stain on the communities which give it shelter, the *Age* proposes to maintain its position and to continue its denunciations of the ignorant pretenders who fatten on the sufferings of the credulous and confiding.

"Having put my hand to the plow in this uncompromising fight with quackery, I beg leave to assure you that there will be no turning back.

"I need not point out the bearings this contest must have on the interests of legitimate medicine, and I earnestly hope that the *Age* may count on the moral support and commendation of the entire profession."

BEARING THE BANNER OF STANDARDIZATION INTO A NEW FIELD!

In the August number of the *Therapeutic Gazette* the statement is made that ergot contains ingredients which on the one hand have a stimulant effect upon the uterus, while others have an influence upon the blood-vessels; and it is also known that ergot which apparently is the best that the market can provide frequently lacks these ingredients, with the result that the administration of the fluid extract made from such a crude drug is absolutely useless in combating those conditions in which this important

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drug is so often employed. Not only is this true of ergot, but "digitalis, strophanthus and similar important remedies require a physiological test before the physician can rest assured that a good result will follow their administration."

We are prepared to carry the banner of standardization into this new field. We have established a very fully equipped physiological laboratory for the special purpose of testing such drugs as ergot, digitalis, strophanthus, cannabis indica, etc., whose therapeutic activities are neither fully nor satisfactorily determined by anything short of test upon the living organism. So far as such drugs are concerned, and with their fluid extracts similarly tested, there can only be the one legitimate conclusion to be drawn—those who desire "accuracy in therapeutics" will recommend their employment.

WHAT IS AMYLACEOUS DYSPEPSIA?

Briefly, it is indigestion of starch or food containing starch. It may be caused by eating the food too rapidly, thereby furnishing it with an insufficient amount of the digestive principle, ptyalin, in the saliva. Or this same principle may be so diluted by gulping the food down with large draughts of liquid that it is drowned, so to speak.

The ptyalin of the saliva will digest all the starchy food that one can eat under normal and proper conditions—that is, if food be thoroughly masticated, thoroughly incorporated with saliva, and not too much liquid be drunk with it. Ptyalin, however, is a very sensitive substance to the influence of acids, and the presence of acidity will effectually destroy its action no matter how thoroughly the food be masticated. Such an acidity, sufficiently strong to prevent all further action of the salivary digestive, occurs as a physiologically normal condition in the stomach about twenty or thirty minutes after eating. Nature therefore considers this period long enough to accomplish all needed starch conversion.

The factors causing indigestion of starch food, apart from those already indicated, are presented where there is insufficiency of the ptyalin principle in the saliva, and where the gastric acid secretion is excessive. The latter condition, known as hyperacidity, is manifested by much earlier acidity of the stomach contents than should exist normally, and it follows that if present sufficiently early it may stop starch conversion almost entirely.

Insufficiency of ptyalin may be assisted by a starch digestant such as Taka-Diastase until Nature recuperates and is able to dispense with its help.

Hyperacidity will require the aid of an alkali to prolong the starch digesting period, and bismuth subcarbonate is probably the best for this purpose. Taka-Diastase should also be given during the meal so that the rapidity of the process will also be accelerated. By so doing there should be no unconverted starch left to undergo fermentation when the acid or proteid-digesting period begins.

"THERE IS ONLY ONE PREPARATION OF DIASTASE."

[From Hare's "Practical Therapeutics," 7th Ed.]

The word diastase is applied to substances found in certain of the digestive juices of the animal body and present in processes connected with grain when fermented, as, for example, in the manufacture of alcoholic beverages. Whatever diastase may be in one sense, we recognize that it belongs to the same class of enzymes as pepsin and the like, and it has the power of converting starch into sugar. Many preparations of malt contain some diastatic power, but there is only one preparation of diastase which possesses no other property save that of aiding the digestion of the starches—namely, one prepared originally by a Japanese investigator, Takamine, and called from his name "Taka-Diastase." It is used to relieve cases of indigestion of the starchy foods in the dose of two to five grains after the beginning of meals, in tablets or capsules or in a solution.

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THIRTY-SIX CASES OF TYPHOID.

A sober and moderate article is that by Dr. D. A. Stanton, of High Point, N. C., in the December, 1897, number of the *Charlotte Medical Journal*. During the fever season of 1896 Dr. Stanton treated fifty-three cases of typhoid fever, with a mortality of $12\frac{4}{53}$ per cent. The last six of the fifty-three patients received the Woodbridge Treatment, each one recovering much more speedily than the convalescents among the other forty-seven. Allowing for the tendency of epidemics to grow milder in type, Dr. Stanton withheld his conclusions.

During the summer and autumn of 1897 he treated, by the Woodbridge method, thirty cases of typhoid with thirty recoveries—100 per cent. He states: "In my practise it has not only cured the patient, but has, in every instance but one, greatly shortened the duration of the fever. The pulse-rate remained below 100 in every case and the temperature ranged from 99° to 102½° F. Not one of my cases lasted over eighteen days, and the most of them were dismissed in from twelve to fifteen days, without a single relapse.

"Some one may say that my cases were not genuine typhoid. I think they were. The other physicians here treated as great if not a greater number than I did, and to my knowledge some of their cases lasted as long as ten weeks; and since my cases were distributed all over town, there could be no possible election in my favor. I feel that thirty-six successful cases is a reasonable number, at least, calculated to encourage me to continue the use of the Woodbridge Treatment."

OIL IN INFANTILE CONSTIPATION AND RICKETS.

J. Wellington Byers, M.D. (*Journal of the American Medical Association*, Dec. 11, 1897), holds that in children constipation and rickets are very closely related, and their treatment should be identical in character. Cod-liver oil, he states, has invariably cured such cases. The effect of the oil is to stimulate the functions of nutrition in the child's tissues to a point where they will resume the assimilation of fat taken in the milk. The oil does not benefit so much by its action as a laxative as by promoting nutrition, thus enabling the child to use the food which before was undigested. Failure to appropriate fats is an evidence of rickets, as shown by the corroborating symptoms, and the stool of a constipated child is composed chiefly of fat and not casein, as commonly taught. The process of cure in each case is restoration of the power of fat assimilation.

***

It is in cases where the digestive apparatus has been greatly impaired, and the normal functions of the stomach, bowels and kidneys perverted, that our Egg Emulsion of Cod-liver Oil is very beneficial, by virtue of its remarkable nutritive properties, perfect emulsification, palatability, permanence, and the large content of pure oil—40 per cent. by volume.

A HIGH OPINION OF ANTIDIPHTHERITIC SERUM, P., D. & CO.

Henry R. Slack, Ph.M., M.D., of La Grange, Ga., expresses (*Atlanta Medical and Surgical Journal*, November, 1897) a high opinion of antitoxin as a preventive and curative agent in the treatment of diphtheria. His own experience in private practise bears out fully the favorable reports made to the American Pediatric Society by its special committee, and the clinical cases recited by him testify to the prompt and powerful action exerted by antitoxin on both the local and constitutional symptoms of the disease. Dr. Slack concludes that the Antidiphtheritic Serum should be administered freely and promptly, as the loss of twenty-four hours may mean the sacrifice of a life. He recommends doses of from 1000 to 2000 units, according to the severity of the case, to be repeated in twenty-four hours if improvement is not manifest. A third dose may be given with perfect safety. Dr. Slack urges the use of the most concentrated strength of an abso-

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lutely reliable preparation. In his own cases he used diphtheria antitoxin of both foreign and domestic manufacture. He prefers that prepared by Parke, Davis & Co. for two reasons: (1) it is put up in hermetically sealed, germ-proof, large-necked glass bulbs; (2) it can be obtained fresher, thus increasing its reliability.

Dr. Slack's article bears out the many tributes that have been paid to our Antidiphtheritic Serum on the score of its entire freedom from sudden fatalities, casualties, or complications of any kind; its great concentration, and the promptness with which its curative powers are manifested.

IS IT MORALLY JUSTIFIABLE TO REENFORCE PIL. C. C., U. S. P., WITH A CHEAP AND VIOLENT CATHARTIC?

We are well aware that there are on the market compound cathartic pills labeled "U. S. P." more active than our own. These pills are sold at a price less than the cost to us of the raw material in our pill. The compound cathartic pill of the Pharmacopœia is not a particularly active combination. We could, without difficulty, increase its activity by adding a trace of croton oil or some other violent cathartic.

But we have always maintained that the physician who prescribes this pill wants and expects his patient to have one made in strict accordance with the official formula. Acting on this supposition we manufacture and sell a C. C., U. S. P. pill that is *absolutely true to label.* The materials employed are the best obtainable. The Compound Colocynth Extract is the same as we market in ounce bottles under our label. The same is true of the Extract Jalap. The Calomel is the best procurable and has successfully passed the searching examination of our Analytical Department. Its purity and identity are assured. We are not less insistent on a superior quality of Gamboge.

Some manufacturers can and do make more active pills, but it is not because they use a better quality of material, but because they have *surreptitiously* added some more powerful cathartics. We have on our list many pills more active than the Compound Cathartic, U. S. P. Pill, but the physician will find on the label of each one a correct statement of its composition.

PHYSIOLOGICALLY TESTED CANNABIS INDICA—ITS INDICATIONS.

Prof. F. W. Goodwin, of the Halifax Medical College, in a paper on Cannabis Indica read at a meeting of the Medical Society of Nova Scotia (*Maritime Medical News*, April, 1898), speaks of the drug as generally met with as being "very uncertain in its strength." He goes on to say further that "the extract manufactured by Parke, Davis & Co. is reliable," basing this statement on personal experience.

Professor Goodwin thinks Cannabis Indica is not now used to the extent it deserves, largely from the fact that many have been deterred from using it because of alarming symptoms that may have been produced in some of their first trials of the drug.

Cannabis Indica is a valuable agent in the treatment of gastralgia, migraine, neuralgia of various kinds, in mania with bromides, neurasthenia, and melancholia. As a hypnotic it may not be so valuable as some of the newer remedies, yet Dr. Goodwin had success with it in two cases of insomnia where other hypnotics in ordinary doses had failed. In tetanus excellent results have been reported in a large number of cases. In paralysis agitans it may be used to diminish the tremors. In dysmenorrhea, chronic endometritis, menorrhagia and metrorrhagia it has strong advocates. In functional impotence due to great excitability or hyperesthesia of the male organ, "prematureness" of the quacks, a very high place is assigned to Cannabis Indica.

We have not had space to do more than merely point out the indications for the usefulness of the drug as detailed at

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greater length in Dr. Goodwin's paper. It concludes with the statement that providing "precautions previously mentioned" are observed it is a valuable part of our armamentarium.

We repeat here that the physiologically tested and standardized "extract manufactured by Parke, Davis & Co. is reliable." It is recommended for your test.

PALATABLE SPECIFIC TREATMENT.

In the later stages of syphilis there is often great difficulty in getting the patient to tolerate either mercury or the iodide preparations. The iodides had so often resulted in intolerance that Dr. Martin* was prompted to have prepared for him by Parke, Davis & Co. a preparation termed the elixir of iodo-tannate of mercury, which is an extremely serviceable form of mixed treatment. In the last few months he has constantly given it to patients who could not take iodides in any form, and their general health has steadily improved.

LEARN THE TRUTH OF THE MATTER.

There are some manufacturers who make and list preparations of the pharmacopœial article called "citrated caffeine," and there are others who make the same preparations but advance extravagant claims for the superiority of their products over the former, pretending to use "*true* caffeine citrate" instead of citrated caffeine. As these claims are not in harmony with facts, we consider that a reprint of our note No. 49 A in our 1898 price list may be of interest:

"Citrated Caffeine. In the manufacture of our tablets we employ Citrated Caffeine, U. S. P., in view of the fact that true caffeine citrate is merely a chemical curiosity possessing no therapeutic properties that do not reside in a mixture of equal parts of caffeine and citric acid. The revision committee of the U. S. P., 1890, knowing that true caffeine citrate immediately splits into citric acid and caffeine in the presence of water, wisely omitted this expensive salt, and adopted instead the official mixture, under the name Citrated Caffeine. This product possesses all the essentials of a soluble caffeine salt, and is supplied by reputable manufacturers when citrate of caffeine is ordered."

*Report of discussion following paper read before the Philadelphia County Medical Society, March 23, 1898 (*Philadelphia Polyclinic*, April 9, 1898).

SCARLET FEVER HYGIENE.

The defervescence of scarlet fever with its accompanying desquamation of a large amount of epithelial débris that is considered to be capable of carrying infection calls for some modern application of antisepsis which shall be grateful to the most tender skin and yet death-dealing to all further development of the disease. Such a hygienic desideratum is found in P., D. & Co.'s Germicidal Soap. A tepid sponge-bath with a light lather of this soap will not only be gratefully accepted by the patient, but will also effectually cleanse and disinfect wherever it is applied. It is a perfect hygienic agent.

ELEGANCE SUBORDINATE TO ACTIVITY—YET VERY DESIRABLE.

Pharmaceutical elegance is not necessarily therapeutic efficacy, yet other conditions being equal it is a point of superiority when comparisons are made. From this standpoint our friend, Dr. J. H. Rabe, of Clyde, O., declares that we "make the only Syrup Hypophosphites." He took a sample bottle of our Hematic Hypophosphites and of two other brands which he mentions, and placed the bottles away on his shelves for a year. Our Hematic Hypophosphites was quite permanent and without change at the end of that time, while the two others had a considerable sediment at the bottom and were otherwise unsightly.

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SALINE SOLUTION QUICKLY ABSORBED.

S. Marx, M.D., of New York, declares that it is remarkable how much salt water the colon will quickly and almost greedily absorb. In a case of collapse after labor, one pint of saline solution was injected hourly for twenty-four hours, and being readily absorbed the patient quickly rallied.

***

Upon the suggestion of Dr. F. S. Locke, of the Physiological Department in Harvard Medical School, and Dr. Hobart A. Hare, Professor of Therapeutics in Jefferson Medical College, we have adopted for our "Concentrated Saline Solution Sterilized" the following formula:

Calcium chloride, 0.25 Gm.
Potassium chloride, 0.1 Gm.
Sodium chloride, 9.0 Gm.
Distilled or tap water, sterilized, sufficient to make 1 liter.

By diluting one bottle of our Concentrated Sterilized Saline Solution with sterilized (boiled) distilled or tap water, to one liter, a solution of the above mentioned composition is obtained.

DIPHTHERIA INVOLVING NARES, PHARYNX, AND LARYNX.

Under date of June 14 Dr. E. B. Studer, of Peoria, Ill., courteously provides us with his notes of a severe case of diphtheria treated by him early in June.

At 2 A.M. June 4, 1898, Dr. Studer administered to his six-year-old patient 2000 units of Antidiphtheritic Serum, P., D. & Co., supplementing the Antitoxin with constitutional treatment by means of corrosive sublimate and ferric chloride. At 3 P.M. 1500 units more of the serum was administered. At 7 P.M. 1000 units additional was given and intubation performed. The following morning a decided improvement was manifest. Recovery was uninterrupted.

Dr. Studer avers correctly that there is no danger in using large and frequent doses of the serum, and that no abscesses will follow if the proper aseptic precautions be taken before the injection is made.

REPORTS.

Terse and True.

Euthymol Tooth Paste is the only dentifrice.—A. GARY, D.D.S., Walker, Iowa.

A Gynecological Assistant.

I am using your Liquor Sedans with great success.—D. M. WAGGONE, M.D., Lewiston, Ill. (Aug. 21, 1898).

Reliable Ergot.

Parke, Davis & Co. make the greatest preparations of Ergot in the world.—F. E. CORRIGAN, M.D., Louisville, Ky.

Thirty-five Cases — Thirty-five Cures.

Success to your Antidiphtheritic Serum. I have not lost a case in thirty-five.—T. BROOKS, M.D., Choteau, Montana.

Never Saw Better.

I am especially pleased with the Egg Emulsion of Cod-Liver Oil. It is excellent. The finest I have ever seen.—HENRY LAMB, M.D., Sandy Lake, Pa.

Stands the Test of Time.

I have been using Liquid Taka-Diastase ever since you put it on the market. I find it a very serviceable preparation and it stands the test of time.—D. B. COLLINS, M.D., St. Peter, Minn.

Satisfied with Cascara Aromatic, P., D. & Co.

Having compared Cascara Aromatic, P., D. & Co., with a great many other makes and finding it to be the best, I do not care to use any other.—T. W. SAMPSON, M.D., Napanee, Ont.

Taka-Diastase the Most Successful.

I consider P., D. & Co.'s Taka-Diastase the most successful of all digestives indi-

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cated in amylaceous indigestion. — DR. F. F. A. HODGEN, St. Louis, Mo., in *Medical Mirror*, August, 1898.

"A Valuable Antiseptic."

I have found Euthymol a valuable antiseptic in intestinal and gastric troubles, and I often exhibit it in dysentery, diarrhea, and typhoid conditions. — D. G. TULE, M.D., Yorkville, Tenn. (Aug. 21, 1898).

Prefers the Germ-proof Container.

I have used your serum and nothing else in seven cases of diphtheria, with complete success. I like the form in which you put it up, and shall use it hereafter in preference to all others.— M. J. TAYLOR, M.D., Janesville, Minn.

Charmed the Diphtheria.

I have had a very severe case of diphtheria, the patient being a little boy seven years old. I used Parke, Davis & Co.'s Antitoxin and the remedy acted like a charm. The glass bulbs, hermetically sealed, afford a convenient and admirable container.—S. H. DULEY, M.D., Morris, Minn.

Not True of P., D. & Co.'s Products.

Many people charge the regular school with prescribing such inelegant preparations. Now, this is true in many cases, but the up-to-date doctor will find no complaint if he prescribes P., D. & Co.'s products. — MONT. H. CASSIDY, M.D., 1512 Scott Ave., Toledo, Ohio. (Aug. 16, 1898).

Beneficent in Digestive Troubles.

I find Taka-Diastase the most efficient remedy in digestive troubles that I have used in all my experience. It is remarkable what an amount of starch is quickly converted by a small quantity of Taka-Diastase. I regard the product as a godsend to all sufferers from digestive troubles.—J. C. STONE, M.D., Madison, Ga.

A Most Malignant Case.

We feel in duty bound to express our gratification at the wonderful result of the use of Parke, Davis & Co.'s Antitoxin in one of the most malignant cases of diphtheria we have seen. From the hour the injection was first used it was simply marvelous to see the rapid improvement and ultimate recovery in a little girl of five years of age.—DRS. BATES & BATES, Chicago.

Aromatic Cascara in Nervous Debility.

Marc Ray Hughes, M.D., St. Louis, Mo., states that in cases presenting considerable irritation in the abdominal cavity, where a laxative is needed, we require a laxative which will not gripe, yet at the same time will act with sufficient vigor. In these cases, as there is frequently present a neurotic condition, a heavy cathartic will depress the nervous system, and thus aggravate the trouble. He finds Aromatic Cascara Sagrada (P., D. & Co.) very efficient in such cases.

Infantile Diarrhea.

I find that infantile diarrhea due to indigestion, with green stools or clay color, responds well to the following:

℞ Hydrarg. cum creta, gr. ¼.
Sodii bicarb., gr. 1.
Pulv. rhei co., gr. 2.
M. ft. tab. Sig.: One three times a day.

I have P., D. & Co. make these tablets, and for general purposes they can be relied on almost every time.—JAS. ARMSTRONG, M.D., Moore, Ont., in *Medical World*.

For Chronic Diarrhea.

C. M. Bell, M.D., Wallas, Texas, states that chaparro amargoso is considered almost a specific in chronic diarrhea by physicians in Mexico as well as in the Southern States. "My experience is greatly in favor of this remedy. All cases of short duration were relieved immediately, and one of seven years' standing yielded rapidly to its influence. An-

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other patient, who had been ill eighteen years with chronic diarrhea, was materially benefited."

We manufacture a fluid extract of Chaparro Amargoso.

A Rational, Scientific Dentifrice.

Your Tooth Paste came to my notice about a year ago. Since then I have been using it personally, and I take great pleasure in recommending it to my patients, as I think it is a good article. I shall continue to recommend it.—F. W. SWEEZY, D.D.S., Port Jervis, N. Y. (March 29, 1898).

I have found your Euthymol Tooth Paste to be the best I have ever used. —DR. F. L. LUNDSTROM, Dentist, Morgan Park, Ill. (April 28, 1898).

I am using your Euthymol right along and I like it better than anything else of similar composition. I and my family prefer the Euthymol Tooth Paste to anything we have ever previously tried.—C. C. MAYNARD, D.D.S., San Jose, Cal. (April 22, 1898).

Antitoxin in the Case of an Infant Fourteen Days Old.

I have had some of the severest cases of diphtheria in this vicinity. I have used Antitoxin and have seen it used in many cases, and seldom will one have to repeat the dose of serum the third time. I never have lost a case with it. Where I have used it for immunizing purposes, not a person has come down with the disease. I am positive I should have lost several cases had it not been for Antitoxin.

I used it on a child only fourteen days old, where the tongue was black and so swollen it could not nurse. In that case I used 1500 units. Did not have to repeat. It gave relief inside of two hours. The child was saved.

I cannot say too much in praise of the Antitoxin prepared by Parke, Davis & Co. It has done wonderful work for me, and I am willing to acknowledge it to you and to my brothers of the profession.—W. H. H. BRIGGS, M.D., U. S. Examining Surgeon, Springfield, Me., Jan. 5, 1898, in letter to D. B. Myshrall, M.D.

Cretinism Treated with Thyroid Extract.

About eight months' treatment has been given. Child was three years old when treatment began. It has gained in strength and intellect and lost the peculiar facial look which it had at first. Temperature has remained uniformly throughout at a subnormal point, 97° F. The head now measures 2½ inches more in circumference, and the child has grown 3½ inches in height. The teeth have now all developed, but it had none whatever before treatment. The Extract used was manufactured by Parke, Davis & Co. Results have been very gratifying so far.

These notes are not full, but give an idea of the benefits of the treatment.—A. F. TUFFORD, M.D., St. Thomas, Ont.

Renal Pain, with Partial Suppression of Urine.

I had been riding a good deal, and contracted a chill, followed by a dull pain in the region of right kidney, and at times I even became lame. My urine began gradually to diminish, and as this progressed for a few weeks I began to fear some organic lesion. I resorted to diuretics and also consulted two of my most esteemed brother practitioners, but to no avail. The amount of urine passed about this time was less than a pint daily; testing it developed nothing ominous. Just then your welcome diuretic elixir came, and hoping it might act favorably I concluded to try it. I took your Saw Palmetto and Santal Compound as regularly as I could, and before the bottle was used up I was surprised at the amount of urine voided. To make sure I measured it and found forty-nine ounces, or fully three pints. The quantity of urine receded again to about two pints, but I feel no great concern now about it, as I am able to perform my usual avocations with ease and comfort.—W. VICTOR BLAKESLEE, B.S., M.D., Lovell Station, Erie Co., Pa.

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GLEANINGS.

Antiseptic Soap in Liquid Form.—When a limb requires thorough cleansing for surgical purposes Dr. J. Adelphi Gottlieb uses P., D. & Co.'s Liquid Antiseptic Soap, Ethereal.—*Medical Review of Reviews*, September, 1898.

"Arms of Precision."—We may have these for therapeutic use. Dr. W. H. Walling says in *Medical Summary* for June, 1898: "If the drug has been carefully selected and prepared and the product standardized, as is done by Parke, Davis & Co., we may expect definite results from a definite dosage."

"Others Practically Worthless."—Speaking of the value of nuclein in cases of phthisis and cancer, Dr. Horace Manders, F.R.C.S.,* says that "it is almost as necessary to be careful in getting a genuine nuclein as it is to use a pure culture of yeast. I always employ that made under Vaughan & McClintock's own supervision, imported into this country by Parke, Davis & Co., others being practically worthless."

The Most Powerful of All Starch Digestants.—In Parke, Davis & Co.'s announcement in this issue an interesting and convincing test for proving the starch-digesting power of Taka-Diastase is outlined. The phenomenal clinical success of this preparation as a remedy for dyspepsia fully confirms the result obtained by the test, and it is among the most frequently prescribed remedies in this almost universal complaint.—*Pharmaceutical Era.*

No Need of Deferring Diagnosis.—Speaking of the diagnosis and the modern treatment of typhoid fever at a recent meeting of the St. Louis Medical Society, Dr. Murphy (*Medical Review*, May 21, 1898) said that if the Woodbridge treatment is resorted to in all suspicious cases "the patient will get well in ten or twelve days and the typical cases of typhoid fever will disappear." There would then be no need to wait absolute diagnosis by the old-time symptoms, for cases would not progress to such stages.

Comfort and Antisepsis Combined.—In an article in the *Indian Lancet* of August 16, 1898, by Dr. Lofteu, upholding the value of "Wet Dressings in Minor Surgery," the following is stated to be an excellent moist dressing for wounds, at once soothing, analgesic, and also markedly antiseptic:

℞ Euthymol, ʒ j.
Phenol sol., ♏ xxx.
Morphia, grs. xij.
Water, q. s. ad ʒ vj.

M.

Typhoid Fever.—In an article with above heading by Dr. F. M. Greene in *Journal of the American Medical Association* of May 7, 1898, the eliminative and antiseptic treatment of this disease is discussed at length. The question is asked: How do the remedies recommended in the Woodbridge method bring about a cure in this disease?

Although there are few better able to write authoritatively on this matter than Dr. Greene, want of space compels us to limit our quotation of its discussion to the concluding paragraph:

"In recapitulation we recommend that the [Woodbridge] treatment be commenced as early as the diagnosis can be made, and persistently carried out until the temperature becomes normal. A careful supervision of both diet and exercise is important to insure our patient against relapse. We have observed under it diminished mortality. It is a treatment pleasant to physician, attendant, and patient. It produces early disinfection of the intestine at the seat of the disease, and prevents serious complications. Baths are unnecessary except so far as surface bathing may contribute to comfort and cleanliness. Antipyretics and opiates are dispensed with. There is a quick return of appetite and rapid convalescence."

*In "The Evolution of Treatment," *Treatment* (London, Eng.), June 9, 1898.

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UNIVERSITY OF MICHIGAN
SCHOOL OF PHARMACY

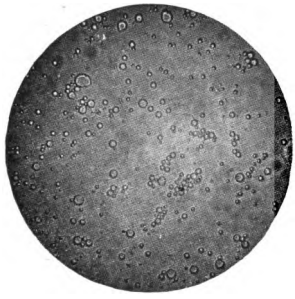
A. B. STEVENS,
915 Oakland Ave.

Ann Arbor, Mich., June 15 1898

Parke Davis & Co.-

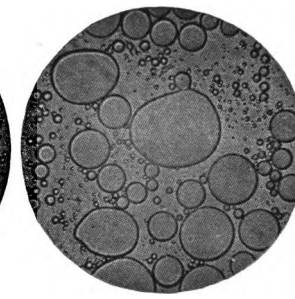
Gentlemen
The accompanying Photo-micrographs were taken from emulsions of Cod liver Oil and Milk. The samples used were taken from original bottles which I purchased in the open market.

Respectfully
A. B. Stevens



MILK.

EGG EMULSION COD-LIVER OIL.
(FORMULA L. B. HEWITT).



A LARGELY ADVERTISED
EMULSION OF COD-LIVER OIL.

Comment is unnecessary. These illustrations tell the story.
We will emphasize, though, another good point, viz.:

EGG EMULSION OF COD-LIVER OIL
(FORMULA OF L. B. HEWITT)

IS ALL FOOD. No acacia, Irish moss, or other indigestible gums or mucilage to load up the stomach. Emulsified only with eggs, flavored with brandy, an absolutely pure Lofoten oil – every ingredient is a nutrient. No emulsion of cod-liver oil on the market to-day is so permanent, so palatable, so nutritious.

Parke, Davis & Co., *Home Offices and Laboratories, Detroit, Michigan.*
Branches in New York, Kansas City, Baltimore, New Orleans.

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When Only One is Wanted.

To facilitate the dispensing of single suppositories we have added a new style of package (see illustration), each suppository being encased in a tube of amber-colored glass, securely stoppered.

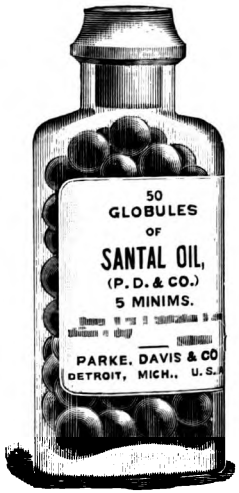
We, of course, shall continue to market our suppositories in bottles of one dozen and one-half dozen each. The glass tubes with individual suppositories will be marketed in boxes of one dozen.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.
Branches in New York, Kansas City, Baltimore, and New Orleans.

Globules of Santal Oil

(P., D. & CO.)



Our Globules of Santal Oil are far superior to the pearls, capsoids, etc., etc., found upon the market. Far superior for the reason that we do not *buy* the oil, it being almost impossible to purchase in the open market a pure oil of santal.

WE IMPORT THE SANDALWOOD AND DISTIL THE OIL IN OUR OWN LABORATORY.

There can therefore be no question concerning the purity of our oil. Another point: Please notice the label. Nothing thereon with regard to the therapeutic properties of Santal Oil which would serve to place the remedy within the reach of the laity—strictly ethical.

Please specify

Globules of Santal Oil (P., D. & Co.).

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USE ONLY PARKE, DAVIS & COMPANY'S FLUID, SOLID AND POWDERED EXTRACTS

As drugs vary greatly in therapeutic activity, some lots being excessively powerful and others much below the average, it necessarily follows that the market is supplied with fluid extracts whose medicinal power varies in like degree.

There is one way of preparing fluid extracts which will render them always—to-day, to-morrow, next month, next year—of uniform standard strength and efficiency. It is the method we employ, and consists, first, in using the best selected drug, and extracting with a high alcoholic menstruum selected in each instance by a study of the characteristics of the drug operated upon; then the chemical assay of each lot of fluid extract and the subsequent adjustment of same to such strength that a given quantity of the fluid extract is equal in therapeutic activity to the corresponding weight of prime drug.

BUT YOU SAY,

"There are some drugs unamenable to chemical assay." Very true. Some of the most important drugs of the whole materia medica, such as Ergot, Cannabis Indica, Digitalis, Aconite, Strophanthus, etc., cannot be standardized chemically, and here particularly is where we leave behind all competition.

All drugs not amenable to chemical assay we test physiologically upon animals. Cannabis Indica, for instance, if therapeutically active, is manifested in the staggering gait, loss of muscular control, reduction of temperature, etc., followed by insensibility. If otherwise, the crude material is rejected as being inert, and within the past twelve months we have rejected over 30,000 pounds of Cannabis Indica.

Our Pharmacological Laboratory is thoroughly equipped for the investigation of the physiologic action of all kinds of potent medicinal agents upon the heart respiration, blood-vessels, kidneys, intestines, nerve centers and nerve endings, muscles, etc., etc.

This method of preparing fluid extracts is more expensive than the one commonly pursued, but it yields products upon which you can absolutely rely. Parke, Davis & Co. is the only House engaged in this work; therefore the only House that CAN guarantee the therapeutic activity of their entire line of Fluid, Solid and Powdered Extracts.

SPECIFY P., D. & CO., AND YOU WILL INVARIABLY GET FROM GIVEN DOSES DESIRED RESULTS.

PARKE, DAVIS & CO.,

HOME OFFICES AND LABORATORIES, DETROIT, MICHIGAN.

BRANCHES IN NEW YORK, KANSAS CITY, BALTIMORE, AND NEW ORLEANS.

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Glycerinated Vaccine

(P., D. & CO.)

We are now prepared to supply Glycerinated Vaccine securely sealed in individual glass tubes.

Sealed Tube. Tube with ends broken off. Tube with Rubber Bulb attached.

Applying the Vaccine to patient's arm.

Our GLYCERINATED VACCINE is marketed in capillary tubes, each holding **sufficient for one vaccination.** As soon as the patient is ready to receive the VACCINE, the operator will break off each end of the tube and expel the contents by means of a small rubber bulb which is furnished with each package of ten tubes. The VACCINE is applied directly from the tube to the patient's arm (or whatever portion of the body is chosen as the site of inoculation).

GLYCERINATED VACCINE is **aseptic vaccine**—the pulp of cowpox vesicles mixed with pure glycerin for the destruction of the comparatively few streptococci or other bacteria likely to be present despite the most careful manipulation of the vaccine-producing animal. Glycerin is not a powerful germicide; but it is powerful enough, as we have abundantly demonstrated in our Bacteriological Laboratory, to render germ-free in a short time the vaccine to which in our hands it is applied. Moreover, it is **perfectly harmless** when applied to the abraded skin in connection with the prophylactic use of the vaccine.

To those who are in the least acquainted with our methods of serum production it will be unnecessary for us to state that in the elaboration of vaccine we guard every step with the most uncompromising scrutiny and assure the **purity of the product** by the most rigid antiseptic and aseptic measures. The heifers before being vaccinated are tested with tuberculin. As an additional safeguard the animals are slaughtered as soon as the vaccine is collected, and a careful inspection of the carcass is made by an experienced meat-inspector; if any evidences of disease are found the vaccine is destroyed.

"Points" are Unreliable and Unsafe.

It is a noteworthy fact that manufacturers of vaccine have generally ignored those rules of rigid surgical asepsis which have been recognized for years as absolutely necessary when the physician desires to make a break in the healthy skin of his patient. As a result, septic infection after vaccination has been commonly met with in general practise. The object of the product now offered by us is to produce infection with *pure* cowpox and to avoid the sores and sloughs which naturally follow the use of vaccine material carelessly prepared and often loaded with the organisms of ordinary pus.

In 1894 the Columbus Medical Laboratory of Chicago made a careful examination of eleven different varieties of vaccine "points," made by as many manufacturers, and only one was found to be free from bacteria and blood-cells. Of the rest, several were decidedly unfit for use.

But, notwithstanding all our aseptic methods, vaccine, like other moist physiological products no matter how carefully prepared and protected, is liable to deteriorate after a certain period of time. For this reason we affix the **date of shipment** to each package, and authorize the drug trade to give fresh VACCINE in exchange for any quantity of unused and deteriorated virus purchased from us in good faith.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Mich.

Branches in New York, Kansas City, Baltimore, and New Orleans.

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Therapeutic Notes

PUBLISHED BY PARKE, DAVIS & CO.,
DETROIT, MICH.

No. 1. Sixth Year. March, 1899.

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Elixir Anti=Asthmatic

(DR. HARE)

FORMULA.

EACH FLUIDOUNCE REPRESENTS:

Sodium Iodide,	16 grains.
Sodium bromide,	16 grains.
Fluid Extract Euphorbia pilulifera,	24 minims.
Glonoin (Nitroglycerin),	1-25 grain.
Tincture Lobelia,	16 minims.

Dose—1 to 2 fluidrachms (4 to 8 Cc.) every 4 hours.

An excellent remedy for the various forms of Bronchial, Nervous or Spasmodic Asthma, and Dyspneic Paroxysms.

WRITE US FOR SAMPLE.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.

Branches in New York, Kansas City, Baltimore, and New Orleans.

Ergot Aseptic.

THE IDEAL PREPARATION OF ERGOT FOR HYPODERMATIC ADMINISTRATION.

EXTRACTIVE matter is inert and causes abscesses. Ergotinic acid is a nerve depressant and irritant. Aside from being entirely free from both extractive matter and ergotinic acid, Ergot Aseptic is Physiologically Tested, Standardized, and Sterilized.

Put up in hermetically-sealed glass bulbs, which exclude all germs or other contaminating substances. No necessity therefore for alcohol, glycerin, salicylic acid, or other preservative, which might prove irritating. Each bulb contains one cubic centimeter, representing two grammes of standard Ergot. It is very rapid and powerful in its effects, producing strong uterine contractions within a surprisingly short time.

LITERATURE UPON REQUEST.

PARKE, DAVIS & CO.,

Home Offices and Laboratories, Detroit, Michigan.

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No Other Serum GERMAN OR AMERICAN.

Has Ever Yielded Such High Percentages of Recovery.

DENVER MORTALITY

4.1 per cent.

In Denver during 1897 there were treated with Parke, Davis & Company's Antidiphtheritic Serum 147 cases, with 6 deaths —a mortality of 4.1 per cent.

CHICAGO MORTALITY

4.1 per cent.

In Chicago during the months of November and December, '98, there were treated with Parke, Davis & Co.'s Antidiphtheritic Serum by the Antitoxin Staff of the Chicago Health Department 219 cases (microscopically verified), with 9 deaths—a mortality of 4.1 per cent.

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TAKA-DIASTASE

is the most powerful digestant of starchy foods ever available in medical practice. Its remarkable efficacy in

Amylaceous Dyspepsia

lifts it wholly out of the category of the ordinary remedies. It stands in a class apart.

Write us for samples and clinical literature.

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Globules of Santal Oil

(P., D. & CO.)

Our Globules of Santal Oil are far superior to the pearls, capsoids, etc., etc., found upon the market. Far superior for the reason that we do not *buy* the oil, it being almost impossible to purchase in the open market a pure oil of santal.

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Globules of Santal Oil (P., D. & Co.).

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Therapeutic Notes

SIXTH YEAR. DETROIT, MICH., MARCH, 1899. No. 1.

THERAPEUTICS.

APOCYNUM CANNABINUM, "THE VEGETABLE TROCAR."

A Strong and Valuable Paper.

In the November number of the *Therapeutic Gazette*, page 730 *et seq.*, Dr. T. S. Dabney, late A. A. Surgeon U. S. Army, New Orleans, La., recites, almost with enthusiasm,* the remarkable virtues of this "most powerful diuretic known" in the treatment of dropsical affections, asserting that "twenty years' experience in its use has given him absolute confidence in his ability entirely to discard the use of the trocar whenever a tincture, fluid extract, or infusion of the *bark* of the *root* of the genuine *Apocynum cannabinum* can be obtained."

Dr. Dabney describes sixteen most interesting clinical cases, quotes the published experience of Gray, Kimball, Lowery, Murray, Jewett, Hutchins, Andrews, Knapp, and Woodhull, and attributes the desuetude of the drug to the number of spurious substitutes for the true *Apocynum cannabinum* and the "unscrupulousness of our manufacturing pharmacists, who do not hesitate to foist upon us, in and out of season, a vast array of their own synthetic products. Will not some great house undertake a careful study of the true and the spurious Apocynaceæ and then furnish the profession with a tincture, a fluid extract, solid extract, and possibly the two alkaloids, apocynin and apocynein, that have so far been separated and recognized? These preparations must be of uniform strength. Cascara sagrada, that most valuable of all remedies in certain forms of constipation, would have shared a fate similar to that of *Apocynum cannabinum* but for a certain western firm that always insisted upon using the bark of the *Rhamnus Purshiana* itself and never any substitute. Cannot this firm, that has furnished so many absolutely reliable products, undertake the manufacture of a fluid extract of *Apocynum cannabinum?* If so, the profession can rely upon its purity and its unvarying physiological results."

Dr. Dabney places the Apocynum "far above all other hydragogues, *especially in Bright's disease*," and enumerates its advantages:

"1. The small quantity necessary to produce free diuresis, emesis, or catharsis.

"2. Its pleasant, aromatic taste.

"3. Its fine tonic properties, which compensate for the depression consequent on free catharsis.

"4. Its harmlessness—an overdose being speedily followed by free emesis.

"With this remedy at our command, I conscientiously believe paracentesis to be, in most cases, unnecessary."

On the occasion of a previous publication we wrote Dr. Dabney, and we here repeat the positive assurance, that we neglect no precaution with a view to obtaining the genuine *A. cannabinum* for the manufacture of our fluid extract; that we employ every safeguard to prevent admixture of the *A. androsæmifolium* in our crude supplies; and that our preparation positively possesses every property and virtue inhering in extract carefully made from the genuine drug.

On Dr. Dabney's showing, the Fluid Extract of *A. cannabinum* certainly deserves searching investigation and a far wider vogue than it now enjoys.

*It will give us pleasure to send a reprint of Dr. Dabney's article, on request.—PARKE, DAVIS & Co.

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SEVEN CASES OF PUERPERAL SEPTICEMIA, FOUR OF POSTOPERATIVE SEPSIS, THREE OF SEPTIC CELLULITIS, AND TWO OF ERYSIPELAS—ALL TREATED WITH ANTISTREPTOCOCCIC SERUM.

At the Memphis meeting of the Southern Surgical and Gynecological Association (Dec. 6, 7, and 8, 1898), Dr. W. L. Robinson, of Danville, Va., presented a paper summarizing his experience in the foregoing with Antistreptococcic Serum of Parke, Davis & Co. The following abstract we borrow from the *Journal of the American Medical Association* for December, 1898:

His experience in the use of antistreptococcic serum in puerperal fever, septic cellulitis, postoperative sepsis, and erysipelas comprises seven cases of puerperal fever treated by him, with high fever, rapid, weak pulse, characteristic breath, chilliness, nausea and insomnia, pelvic tenderness, with scanty, fetid lochia. From 12 to 20 cubic centimeters of the serum was injected after the usual treatment had failed, namely, irrigations, both intra-uterine and vaginal, sealing abrasions of the cervix and perineum, saline injections, purgatives, stimulants, etc., with prompt improvement in the general condition, rapid fall of temperature, lowering of pulse-rate, and complete recovery. The effect was manifest in from eight to sixteen hours in the majority of cases.

In the three postoperative cases of sepsis, seemingly hopeless, all usual treatment failing, the serum in twelve hours transformed every symptom of high fever, chilliness, rapid weak pulse, diarrhea, etc., into a hopeful condition, resulting in rapid recovery. Pain subsided in twelve hours; fever in eight hours; diarrhea in forty-eight hours. The first case was a vaginal hysterectomy; the second was operated on for the removal of pus tubes; and the third was a vaginal hysterectomy.

The three cases of septic cellulitis consisted of suppurative cellulitis of the hand, commencing in a finger, one of injury from a rusty nail, and the other from the spur of a cock. Both had been treated by general alterative tonics and locally with improved antiseptic measures, but the disease steadily progressed, involving new tissue, until the serum was used, when the progress of the disease was promptly arrested in both cases and the hands saved. A third case was a gunshot wound of the ankle, with marked septic prostration, chills, diarrhea, etc., which were dissipated promptly by the use of the serum, so far as fever and general septic symptoms were concerned.

Two cases of erysipelas. One 16 years of age, in which an abscess developed following the extraction of a tooth, discharging at two points on the neck. Redness and swelling covered one-half of the face, nose, and head. Temperature 104.4°; pulse 140; delirium, vomiting, chilliness, etc. Ten cubic centimeters of the serum was injected at 9 P.M., which resulted in a decline of temperature to 100°. The next morning there was complete arrest of all symptoms, followed by prompt recovery. The second case was one of nephritis, with puffed eyelids and face; erysipelas of the thigh; a hard, red, shiny swelling; delirium. Two injections of the serum were used in twenty-four hours, and at the end of thirty-six hours the patient was convalescent.

In reply to a question, the essayist stated that the serum used was that of Parke, Davis & Co.

TREATMENT OF NASAL CATARRH.

BY MURRAY MC FARLANE, M.D.,
TORONTO, ONT.

Having found Seiler's and Dobell's solutions irritating, owing to the number of so-called antiseptic oils and so forth, which are out of place in the majority of nasal diseases, being sufficiently strong to irritate and not strong enough to be of service where antiseptic treatment is really needed, I looked for something that would be alkaline in reaction and as nearly non-irritating as any spray solution could be.

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Itstruck me that the human blood was the typical example of a non-irritating alkaline medium, and after having obtained an analysis of the plasma, I ordered from Parke, Davis & Co. a tablet containing the soluble salts of the blood to which was added one-sixteenth of a grain of menthol, one tablet added to 1000 drops of lukewarm water (roughly, four tablespoonfuls) making a solution of the same specific gravity and composition as the blood plasma.

They are to be had from the above firm, being known as "Plasma Nasal Tablet" (Murray McFarlane). I only claim that they are a non-irritating wash for nasal troubles and are to be used in connection with the nasal method of treatment of diseases of that organ. They are being used quite extensively in this country and England, the London *Lancet* having spoken very favorably of the formula. In cases of deafness due to middle-ear implication from nose and throat disease, they may be used over a long period of time, causing no irritation, and in many cases acting in the most satisfactory manner as to results.

Above all things the general health must be looked after, for I consider that a disordered condition of the digestive organs is responsible for many of the diseases affecting the respiratory tract.—*Medical World.*

Compare Results.—In a paper on "Diphtheria and its Treatment with Antitoxin," read at the meeting of the Brazos Valley Medical Association, at Calvert, Texas, May, 1898, an interesting comparison was made by Dr. Eugene Brittain of the results obtained in a series of forty-nine cases of diphtheria occurring at or near Bremond, Texas. There were twenty-six cases treated with P., D. & Co.'s Antidiphtheritic Serum, and but one death. There were twenty-three cases treated without the Antidiphtheritic Serum, with ten deaths. Expressed in percentage these results are: with serum treatment, 3.84 per cent. died; without, 43.47 per cent. died!

AN IMPORTANT EXCEPTION.

George Herschell, M.D., Addressing the British Medical Association,* Singles Out Taka-Diastase for Commendation.

In a discussion of "Diseases of the Stomach," Dr. Herschell remarked that it is a pity that the "elementary facts about the digestive ferments are not more generally borne in mind, and that medical men still continue to prescribe proprietary mixtures of the digestive ferments at the instance of their manufacturers.

"An important exception is to be found, however, in the Taka-Diastase. Professor Ewald has pointed out to us that deficiency in the amount of salivary ferments is a matter of extreme rarity, but circumstances not infrequently combine to prevent it from carrying out its work. It may be that by imperfect mastication, or owing to defective teeth, the flow of a proper amount of saliva is not excited, but by far the most frequent obstacle is the presence of an abnormal amount of hydrochloric acid in the stomach, such as we get in ulcer, hyperchlorhydria, and some other conditions. This, as we have already pointed out, inhibits the action of the salivary ferment, and consequently in these cases there will be indigestion of the starchy part of the food. By the administration of Taka-Diastase and alkalies we are enabled to give these patients a diet containing a large proportion of carbohydrates if we wish to do so."

CHRONIC STOMACH DISORDERS.

BY D. A. NEILSON, M.D., MORRISTOWN, TENN.

I have used Taka-Diastase in a good many cases of chronic stomach troubles and with invariable success, where the patient followed directions faithfully. One case I will mention:

*Edinburgh meeting, Section of Pharmacology and Therapeutics.

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On March 19, 1897, I was called to see Mrs. W. B——, of this place, and found her extremely emaciated, very feeble, and despondent. She stated that Dr. ——, of this place (who is one of our best physicians), had treated her for eight months, and as she gradually grew worse her husband took her to a specialist in Knoxville, Tenn., who treated her for two months, and as she was still growing worse I was called in. I diagnosed amylaceous dyspepsia and prescribed Taka-Diastase in four-grain doses, just before each meal, requesting her to eat in moderation for a few days. In two weeks she was eating heartily her ordinary diet without the least discomfort, had gained considerable flesh, and was attending to her household duties. She has suffered none since, and to-day she has more strength and flesh than she has had for years, and enjoys life with a zest.

EIGHT VALUABLE ALTERATIVES COMBINED.

There is a class of remedies used by physicians which, in ordinary doses, do not appear to produce very evident effects, but which, nevertheless, do exert a most beneficial action in certain diseases associated with the various processes of nutrition; their mode of action cannot be observed, yet their influence is recognized in clinical experience.

These remedies, known as alteratives, seem to act by stimulating the cutaneous, hepatic, and gastrointestinal functions, thus bringing into active operation those processes which have for their special end the production of healthy blood; namely, the digestion and assimilation of food, and the elimination of the products of tissue change.

The alteratives in general use may be classed as organic or inorganic, according as they are derived from the vegetable or mineral kingdom. The individual members of each class have their peculiar uses, but in the vast majority of cases the vegetable alteratives are to be preferred, as they are not possessed of dangerous toxic properties such as are manifested by mercury, arsenic, and iodine.

In our SYRUP TRIFOLIUM COMPOUND we have combined not one or two, but *eight* of the most valuable alteratives known to the medical profession. Each fluidounce contains the active principles of red clover blossoms, stillingia, lappa, phytolacca root, berberis aquifolium, cascara amarga, and xanthoxylum, with the addition of potassium iodide.

This formula does not include a single useless member; each has been thoroughly tested in actual treatment, by careful observers, and hence, instead of a promiscuous admixture of doubtful utility, we have, in Syrup Trifolium Compound, an elegant and efficient combination which is, without exception, the best remedy of its class; for it is a well-established fact in therapeutics that two or more remedies, having the same or a similar action, will exert a more pronounced effect when administered together, each supplementing or reenforcing the other.

Syrup Trifolium Compound is most useful in the treatment of congenital tuberculosis, syphilis, and those skin diseases which are dependent upon malnutrition.

On account of its pleasant taste it is very acceptable to children, and it may be used as a vehicle for the prolonged administration of inorganic alteratives in those cases where they could not be tolerated alone.

It may be combined with the hypophosphites in the form of Syrup Hematic Hypophosphites, in the treatment of tuberculosis, chronic bronchitis, and other cachectic conditions; while the reported striking effects of this combination in anemia would seem to warrant its more extended use in that particular condition.

The Syrup has been employed *locally* in the treatment of syphilitic ulcerations of the nasopharynx. And in a case of hydrocephalus, reported by Dr. S. W. Clark, of Oskaloosa, Ia., five-drop doses, thrice daily, perfected a cure in three months.

We confidently believe that no better or more reliable alterative can be found on the market.

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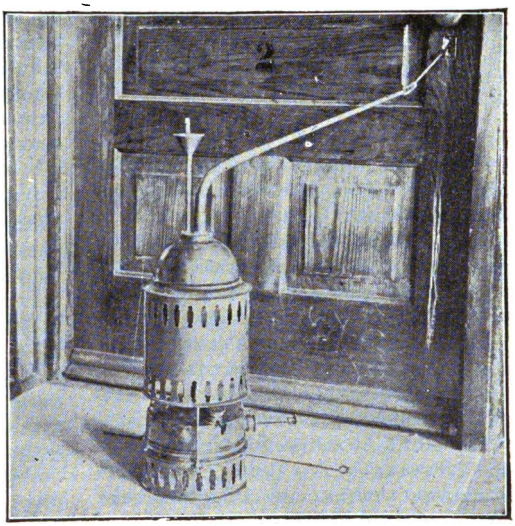
TWENTY-TWO CASES TREATED WITH ANTISTREPTOCOCCIC SERUM.

At the Nashville meeting of the Mississippi Valley Medical Association, October 11–14, 1898, Dr. William L. Baum, of Chicago, read a paper on "The Therapeutic Value of Marmorek's Serum." He dealt with the literature of the subject in an exhaustive manner. Twenty-two cases have come under his observation in which the serum was used. Of these, nineteen were cases of erysipelas; one of erysipelas plus tubercular nuchal glands; one of facial erysipelas during childbed without septicemia; and one of erysipelas with puerperal septicemia and double labial abscess. The last was the only fatal case. The serum used in all was supplied by Parke, Davis & Co.

The deductions he draws from an analysis of the literature and his own experience are: (1) In pure streptococcic infections the serum undoubtedly exercises a favorable influence on the course of the disease. (2) In the mixed infections the influence of the serum is noticeably demonstrable, but it merits further trial as an adjunct to other treatment. (3) Considering the grave character of the complications of a non-streptococcic nature reported, ordinary rules of therapeutics demand that in such cases, as with the diphtheria antitoxin, all indicated therapeutic procedures must be employed as well as the serum. (4) In view of the fact that erysipelas streptococci and phagocytes have been found to exist side by side in the lymph channels, it is fair to assume that the influence of the serum is directly exerted bacteriologically on the streptococci and not entirely through stimulation of phagocytic action. (5) The initial dose in all cases should be 20 cubic centimeters, to be followed by 10 or 15 cubic centimeters, according to the indications, every twenty-four hours.—*Medical News.*

OFFICIALLY RECOMMENDED BY THE MICHIGAN AND COLORADO BOARDS.

Dr. Novy's Formaldehyde Generator has been recommended by the Michigan and Colorado Boards of Health to the physicians in their respective States as a thoroughly reliable, efficient, and economical apparatus for the disinfection of sick-rooms, clothing, bedding, and so on.



Formaldehyde, while one of the most active disinfectants, is free from many of the objections which may be urged against the use of carbolic acid, sulphur, and other well known agents. By means of the Novy apparatus the atmosphere of a large room can be saturated with formaldehyde in half an hour; the room should then be kept tightly closed for ten hours, when it will be reasonably safe to conclude that all disease germs have been destroyed.

Perhaps it would be well to state that the generator described in the reports of the Health Boards referred to above is the original model proposed by Dr. Novy, which is not nearly so complete as the one that we are prepared to supply, as shown in the accompanying illustration. We shall be pleased to furnish to any

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physician requesting the same a reprint of a paper on "The Disinfection of Rooms," by Prof. F. G. Novy and H. H. Waite, which appeared in the *New York Medical News* of May 21, 1898.

CONDENSED NOTES ON ANTI-DIPHTHERITIC SERUM, P., D. & CO.

Your Serum acted more rapidly than any other I have ever used. The manner in which your product is put up is beyond question the best.—W. H. GUNTHER, M.D., Sheboygan, Wis.

***

I have used Antitoxin upon a number of cases of varying intensity and have yet to report a death.

American manufacturers place fully as good serum before us as comes from Europe. From the standpoint of efficacy, safety, and promptness the Antitoxin of Parke, Davis & Co. stands at the top of the ladder, and can be used to secure all the advantages to be obtained from this most excellent and thorough remedy.—"The Merits of Antitoxin," by PROF. C. H. POWELL, M.D., Editor, in *North American Journal of Diagnosis and Practice*, April, 1898.

***

In no case did the antitoxin produce any untoward effects. My experience with Parke, Davis & Co.'s Antitoxin fully bears out the many favorable reports submitted from all parts of the country.—DR. J. C. FULTON, in *Indiana Medical Journal*.

***

Parke, Davis & Co.'s Antidiphtheritic Serum being marketed in hermetically sealed glass bulbs gives a greater assurance of asepsis. It has my preference because of the small quantity of serum to the required number of antitoxic units; for I believe most of the disturbances following and attending the injection of Antitoxin (erythema, urticaria, kidney difficulty, pains in the joints, etc.) are to be attributed to the large quantities of horse serum, or to a lack of asepsis in injecting it. At the present time the occurrence of these unpleasant symptoms is very rare.—KARL DUPERNELL, M.D., in *Sanative Medicine*.

***

Dr. W. M. Donald reports in the *New York Medical Journal* (May 21, 1898) his experience with P., D. & Co.'s Antidiphtheritic Serum, as curative and immunizing agent, in three separate outbreaks of diphtheria which he has treated in the Detroit Protestant Orphan Asylum during the last two years. The total mortality among those receiving injections was only four-fifths of one per cent—2 deaths among 265!

***

The purity and uniform strength of Parke, Davis & Co.'s Antitoxin cannot be questioned, and the neat and thoroughly aseptic method of placing it in the containers, ready for the physician's use, makes it, I think, above all others the most desirable preparation.—"The Value of Diphtheritic Antitoxin in the Treatment of Membranous Croup," by L. I. MATTHEWS, M.D., in *Therapeutic Gazette*.

***

While there may be several products which deserve a reputation, I prefer Parke, Davis & Co.'s manufacture, chiefly, perhaps, because the result has always been satisfactory, and in medicine I believe it to be a good rule that when you know you have a good thing, hold on to it.—"Antitoxin in Diphtheria," by C. F. MARKEL, M.D., in *Medical Review*.

STIMULANT, EXPECTORANT, AND ANODYNE.

A seasonable formula with these properties is that represented by our Tablet Triturate No. 266, "Ammonium Chloride and Codeine Compound." Each tablet contains:

Ammon. chloride, 1-4 grain.
Extract glycyrrhiza, 1-10 grain.
Cubeb, powd., 1-3 grain.
Codeine, 1-25 grain.

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SODIUM PHOSPHATE IN A VERY POPULAR FORM.

Bartholow highly recommends phosphate of sodium as *the* remedy in cirrhosis of the liver and jaundice. It has unquestionably a remarkable influence upon the hepatic secretion in children, as was first observed by Dr. William Stephenson, of Edinburgh. According to this authority, in infantile cases, with white or green stools, diarrhea, and sometimes jaundice, sodium phosphate in small doses will correct the symptoms of disordered hepatic function, restoring the healthy yellow color to the stools, with subsequent improvement in the general systemic condition.

Hare, in his Text-book of Practical Therapeutics, says "phosphate of sodium is particularly useful for bottle-fed children who continually alternate between diarrhea and constipation, and is also useful for rickets."

Sodium Phosphate exerts a peculiar influence upon the blood-vessels of the small intestine and liver, abstracting matter from the capillary circulation, and thus relieving hyperemia of those organs. As a consequence the most satisfactory results accompany its administration in catarrh of the duodenum and common bile-duct, with the attendant hepatic state of engorgement generally known as "biliousness."

We have recently placed upon the market a Concentrated Solution Sodium Phosphate, P., D. & Co., which is so pleasantly flavored that it may be taken readily by children and persons of delicate taste. Each fluidounce of this solution contains 1 ounce of sodium phosphate, 68 grains of citric acid, and 6 grains of potassium nitrate, affording a convenient, efficient, and palatable saline laxative which should prove especially useful to the general practitioner, who can readily appreciate its many advantages, especially when called upon to prescribe a cathartic for his little patients. From three to ten, or even twenty, drops may be administered to infants, preferably in milk, and repeated as often as may be necessary. As a laxative for adult use, one to two tablespoonfuls may be taken in cold water before breakfast, or in hot water if more rapid absorption is deemed important; as an antacid, one to two teaspoonfuls should be taken in water, with meals.

Among the diseases in which special indications will arise for the employment of Concentrated Solution Sodium Phosphate, may be mentioned gout and rheumatism and allied conditions caused by or complicated with the presence in the blood of an excess of uric acid; here it will serve as a useful adjuvant to, or even a substitute for, the salicylates and other uric acid eliminants.

Particular attention should be directed to the importance of regulating the daily action of the bowels and reducing the consistence of the bile by the administration of Concentrated Solution Sodium Phosphate, P., D. & Co., for the purpose of restraining the tendency to the formation and passage of biliary calculi. Sodium phosphate increases oxidation of adipose tissue, and, by virtue of its diuretic property, hastens the elimination of the products of tissue waste, quickens the capillary circulation, thus interfering with the deposit of fat, and increases the total daily output of urine. For this reason it has acquired a merited reputation as a valuable remedy in the treatment of obesity, and no more suitable mode of administration could be devised than that afforded in our Concentrated Solution Sodium Phosphate, which will not provoke nausea even when its use is continued for a protracted period.

It has been suggested that Sodium Phosphate is worthy of a trial in the treatment of diabetes, from the fact that it is supposed to have the power of checking the glycogenic function of the liver.

We shall be pleased to furnish samples to any of our medical friends who wish to make a practical test of this important addition to the list of elegant, yet efficient, pharmaceutical preparations.

We also manufacture "Granular Effervescent Sodium Phosphate;" each drachm contains 15 grains of Sodium Phosphate.

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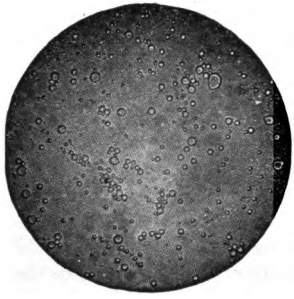
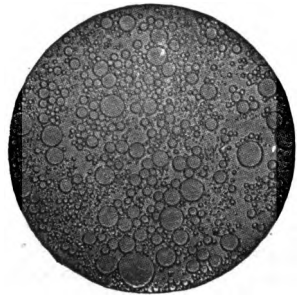
WE HAVE ERADICATED EVERY OBJECTIONABLE FEATURE FROM A CLASSICAL REMEDY.

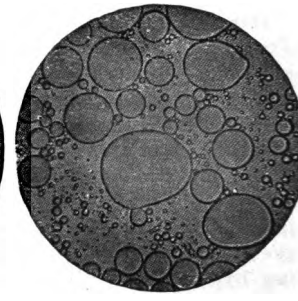
The consensus of medical opinion, widely proclaimed in the literature of the profession the world over, has established, beyond the shadow of a doubt, the therapeutic value of a *pure* cod-liver oil. The question which concerns prescriber and dispenser particularly is, How shall cod-liver oil be collected and *prepared* to insure a perfect product free from every trace of deleterious material, and, at the same time, acceptable to the capricious palate of the invalid?



Milk.



Egg Emulsion Cod-Liver Oil. (Formula L. B. Hewitt.)



A largely advertised Emulsion of Cod-Liver Oil.

We have solved this problem, carefully and completely; and as a result we are able to offer, in our Egg Emulsion of Cod-Liver Oil, an elegant, palatable, and nutritious food, which is entirely free from every objection which has heretofore prevailed against this time-honored remedy.

In our Egg Emulsion the oil is perfectly and permanently subdivided into minute globules, as a microscopic test will prove; it contains 40 per cent, by volume, of Pure Lofoten Cod-Liver Oil, collected with special care by our agents on the fishing-grounds, and emulsified with eggs and brandy only, no acacia or other inert mucilaginous agent being used; every drop is wholesome, nutritious material. Its permanence is assured under all ordinary and reasonable conditions, and it is readily miscible with water, milk, or wine, so that the mode of administration may be conveniently varied to suit the most whimsical taste.

We take pleasure in commending this preparation to the profession as a reliable emulsion, possessing unusual nutritive properties, which will withstand the tests of time and change of temperature longer than any emulsion now before the public.

CASCARA IS AN INVALUABLE DRUG.

At a meeting of the New York Academy of Medicine (Section on General Medicine) held November 15, 1898, George Roe Lockwood, M.D., of New York City, read a valuable paper on "The Non-Medicinal Treatment of Constipation," laying particular stress on the propriety of combating the constipated habit: (1) by diet; (2) by measures calculated to strengthen the abdominal supports; (3) by hydrotherapy; (4) by sedative remedies; (5) by oil irrigations.

In the ensuing discussion, participated in by Dr. Beverley Robinson, Dr. L. Emmet Holt, Dr. Jackson, and Dr. Van Valzah, the latter expressed the opinion that "Cascara, when properly employed, is an invaluable drug. Every one should have some fixed time for going to stool. This should be when they are at leisure. It may be any time, morning, noon, or night. The cascara should be given not three times a day as is often done, but in one dose so as to act at the desired time.

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The fluid extract of Parke, Davis & Co. has given me the best satisfaction. The dose must be decided for each patient and must be just enough to produce a formed, not a loose, stool. After ten days to two weeks the dose may be lessened by a drop or so every third night, not oftener, and thus the patient gradually brought to do without its assistance."—*Medical News*, Dec. 10, 1898.

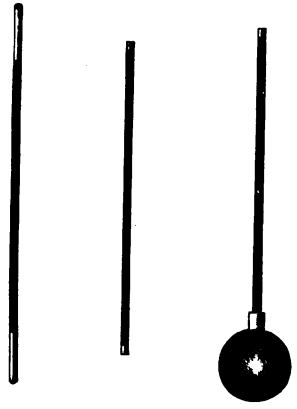
THIRTY-SIX YEARS' EXPERIENCE IN VACCINATION.

BY WARREN E. DAY, M.D.,
Health Officer, Prescott, Arizona.

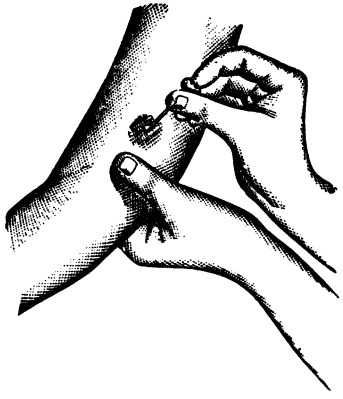
During my thirty-six years' experience in the practice of medicine and surgery, twelve years of army practice, and four years in public service, I have performed thousands of vaccinations, in fact have used over 2000 points put in my hands by the United States Government, and within a month I have ordered and used over 500 tubes of the Vaccine Virus sterilized with Glycerin from the house of Parke, Davis & Co. I can truthfully say I have never been so well satisfied with vaccine put up in any way, as with the tubes.

The Glycerinated Vaccine of Parke, Davis & Co. has never failed me in a single instance of primary vaccination.

January 3, 1899.



Sealed tube. Tube with ends broken off. Tube with rubber bulb attached.



Applying the vaccine to patient's arm.

MALT DIASTASE AND TAKA-DIASTASE COMPARED.

Some very interesting evidence regarding the comparative rapidity of action of Taka-Diastase and diastase precipitated from malt infusion is embodied in the report by Profs. W. E. Stone and H. E. Wright, of Purdue University, which appeared in the September number of the *Journal of the American Chemical Society*. Without entering into the technical details of this report it is sufficient to say that in three series of tests in which equal amounts of starch jelly and the same quantity of the two diastases were employed, the relative activity and rapidity of action were determined by the starch test, by the optical rotation of the digesting solutions, and by the amount of maltose produced by copper solution. The results obtained clearly demonstrate the peculiar excellence of Taka-Diastase over malt diastase as a therapeutic agent, because of its great digestive power and rapidity of action.

After determining the amounts of maltose produced by the two digestive agents within a limited time, the authors say: "These results show that for a given short time the actual saccharifying power of Taka-Diastase is decidedly superior to malt diastase."— *The Bulletin of Pharmacy*.

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THE ADHATODA VASICA, OR MALABAR NUT.

This is a curious plant whose habitat is the East Indies, where it is sometimes cultivated. It has expectorant and antispasmodic properties, and its use has been recommended in the treatment of coughs, colds, asthma, phthisis, and even diphtheria, in which it deserves more extended trial. It is said, also, to be a valuable antiseptic, antiperiodic, and anthelmintic.

Dr. Rusby states that "it appears to be toxic to all forms of life, in direct proportion to their lowness in the scale, and that this property is unique among plants. . . . The leaves are found to completely destroy the lower aquatics and to prevent their reappearance. Laid upon fruits and other perishable substances they, to a great extent, prevent mold and decay. They check the development of parasitic diseases on vegetation. The very extended use of this plant in India in the treatment of tuberculosis and other respiratory diseases may be founded upon this property."

There seems to be a wide field of usefulness for this remarkable plant in the treatment of diseases depending upon the presence of fungi, bacteria, etc., and we shall cheerfully supply literature and samples of the fluid extract of the leaves to physicians who will report the results of their experience with it, whether favorable or otherwise.

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87 VACCINATIONS — 83 SUCCESSES.

BY GEO. W. MORAN, B.SC., M.D.,
Physician to St. Vincent's Orphan Asylum.

I believe the following report will be interesting to vaccine users:

On November 15, 1898, I made 25 primary vaccinations, using your Glycerinated Vaccine Lymph which you are now putting up in hermetically sealed tubes. Of these 25, 21 proved successful.

Again, on November 26, 1898, I made 25 more primary vaccinations, and of these 25 the whole number worked.

Again, on December 3, 1898, I made 37 more primary vaccinations, and of this number 36 have proved successful, and the remaining one gives indications of beginning activity.

The particularly noticeable features about this Vaccine Lymph are its *activity* and *purity*.

All of these vaccinations have been extremely healthy in appearance, not a single one having shown any signs of mixed infection.

The arms were prepared as follows: First washed with Germicidal Soap, rinsed with sterile water, then washed off with normal salt solution.

The scarifications were made with a needle, drawing as little blood as possible, immediately injecting lymph on scarified surface and rubbing it in well with needle point.

The scarification should be protected for three or four days with a sterilized gauze pad held in position by an adhesive strip.

December 10, 1898.

LARYNGEAL OR WINTER COUGH.

The *New York Medical Journal* is responsible for the statement that "in acute cases of laryngeal or winter cough, tickling and irritability of the larynx, acetanilid and codeine will be found exceedingly valuable." If the spasm prevails at any particular time—morning or night, for instance—it should be anticipated by about an hour with our Chocolate-coated Tablet, No. 158, Acetanilid and Sodium Compound, with codeine, repeating again in an hour. A third dose may be given, if necessary. Each of these tablets contains:

Acetanilid, 3½ grains.
Sodium bicarbonate, 9-10 grain.
Sodium bromide, 1-10 grain.
Caffeine, ¼ grain.
Codeine, ¼ grain.

This will be found to be also an excellent combination for neuralgia and for a multitude of nervous ailments; it establishes no requirement or habit in the system, as does morphine.

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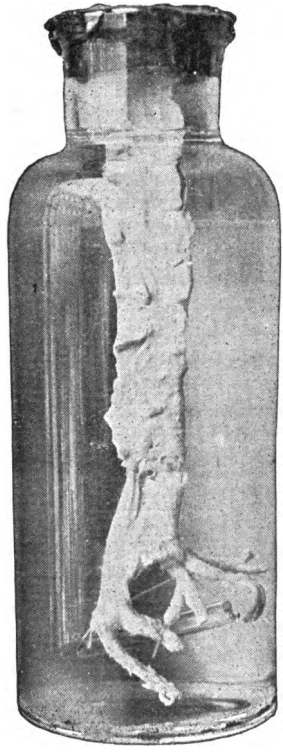
REPORT OF CASE OF DIPHTHERIA INVOLVING LOWER LARYNX, TRACHEA, AND BRONCHI, WITH RECOVERY.

BY M. MORGAN, M.D., BERKLEY, VA.,
in *Therapeutic Gazette.*

Mrs. H——, aged 18, had a cold since December 1, and on January 7 lost her voice. On January 10 she called in Dr. Truitt, who found the patient suffering with some dyspnea and cough, and a temperature ranging from 102° to 103°. There was no deposit in the pharynx or on the tonsils at this time or subsequently. On



the 12th of January there was coughed up a membrane about three inches long. On the morning of the 13th I was called in consultation; the patient had great dyspnea and coughed up a second piece of membrane about two and a half inches long. Through the courtesy of Dr. McCormick, city bacteriologist of Norfolk, a culture was made from this and found to be purely diphtheritic. The temperature remained about 102° to 103°, the dyspnea continuing. On the morning of the 13th of January 1000 units of the antitoxin of Parke, Davis & Co. was administered, stimulating treatment being maintained meanwhile. On the evening of the same day another 1000 units of the same serum was injected. The dyspnea was improved shortly after the first injection; the temperature rose to 104° and remained there until a few hours after the second injection. There was considerable nausea, and on the next morning (the 14th) the membrane shown in the illustration came away, with relief of all the symptoms, the temperature fell, and the dyspnea was entirely relieved. The patient made an uninterrupted recovery.

Thanks are due Dr. Gwathmey for mounting the specimen, and Dr. McCormick for making culture.

FROM THE DISTINGUISHED AUTHOR OF THE FIRST AMERICAN TEXT-BOOK ON MICROSCOPY.

"Your microscopic slides of disease germs are mounted in the very best style. As a teacher of microscopy for twenty-five years past, and author of the first American text-book, 'The Microscopist,' I have been familiar with the progress of laboratory technique, and testify intelligently that you have placed all students of biology, and practical physicians, under obligations to you for your numerous and valuable aids in their work."—J. H. WYTHE, M.D., LL.D., Professor of Histology in Cooper Medical College, San Francisco, Cal.

MOSQUERA'S BEEF JELLY,

marketed by Parke, Davis & Co., is one of my favorite preparations, and is daily prescribed by me.—MELVIN B. HUFF, Pasadena, Cal.

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A CRETIN GROWS THREE INCHES AND CUTS FOUR TEETH AFTER THIRTY.

An instance of very marked improvement in a case of this fortunately rare condition is reported by Dr. Wharton Sinkler in the *Philadelphia Medical Journal*. The medicament employed was Parke, Davis & Co.'s thyreoids in doses of three grains three times a day. The most striking points relative to the case are that, after the age of 30 years, the patient's height increased nearly three inches through the administration of thyreoids only; also that menstruation, which had not appeared until the age of 26, and then occurred scantily at intervals of three or four months, became regular and normal; that four additional teeth were cut; and that her intelligence was much improved.

STARCH FOOD: ITS USE AND ABUSE.

BY D. G. SIMMONS, M.D.

[Abstract of paper read before the Southern Kentucky Medical Association.]

Much knowledge during the last year or two has been accumulated with respect to the part which the imperfect digestion of the carbohydrates or starch foods plays in the production of diseases of the stomach and intestines as well as in the pathological conditions of other organs.

Without quoting what the author affirms to be causes for the connection between the two, the paper proceeds to state that most catarrhal conditions of the stomach and bowels are associated with impaired digestion or malconversion of starch, and that therefore an artificial ptyalin to convert the starch into a soluble sugar should be given in these cases. This should be given until the natural process is restored. As an aid to the conversion of starch, Taka-Diastase is an invaluable remedy—certainly the best substitute for ptyalin which we know at present. Almost marvelous results have been secured by its use, and it has come to stay. The young as well as the old are equally benefited by its use. The dose of Taka-Diastase is small—two to five grains; it is readily soluble and has no unpleasant taste. Parke, Davis & Co. are the sole manufacturers of it. It should be given during or after meals so as to complete the conversion of the starch into maltose before it can be inhibited by the gastric juice, whose acidity Taka-Diastase resists longer than does the ptyalin of the saliva. It also seems to exert considerable influence on the *digestion of albuminoids*. This medicine, together with a proper attention to diet, exercise and the laws of health and hygiene, will so improve the digestion and assimilation within a few weeks that Nature will be able to complete the cure.—*American Practitioner and News*.

"BLUE PILL" IN A NEW DRESS.

In some of our southern and eastern States the extensive use of the following formula has for some time impressed us with the advisability of placing it upon our price list. This we have decided to do as gelatin-coated pill Blue Mass Compound (McGuire); the formula is as follows:

PILL NO. 868, BLUE MASS COMPOUND (MC GUIRE), GELATIN-COATED ONLY.

Mass of Mercury, 1 grain.
Powdered Rhubarb, 1 grain.
Extract Colocynth Compound, 1 grain.
Purified Aloes, 1 grain.

A GREAT HELP IN BACTERIOLOGICAL WORK.

In my researches upon the bacteriology of parotitis I used with much satisfaction the culture media prepared in the Biological Laboratory of Parke, Davis & Co. The various media supplied by them are perfectly reliable, as they are prepared under the supervision of a skilled bacteriologist, thoroughly sterilized, and are a great convenience to the general practitioner who is unable, for lack of time, to prepare his own culture media.—CHARLES F. CRAIG, M.D., on "The Bacteriology of Epidemic Parotitis (Mumps)."

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

EDITORIAL.

NO OTHER SERUM, GERMAN OR AMERICAN, CAN PARALLEL THIS BRILLIANT SHOWING.

One of the most remarkable and disinterested tests to which antidiphtheritic serum has ever been subjected was that made under the auspices of the Chicago Health Department during the past winter. From a paper read by Dr. William K. Jaques, Director of the Diphtheria Antitoxin Staff, at a recent meeting of the Chicago Medical Society, we borrow the statement that the staff treated with Parke, Davis & Co.'s Antidiphtheritic Serum 219 cases of bacterially verified diphtheria during November and December, 1898, of which 23 were intubation cases. Of the whole number treated (219) ONLY NINE DIED, a mortality of *4.1 per cent*, which is the lowest death rate ever yet recorded in the treatment of charity patients.

Nearly all of these cases were referred to the Health Department by physicians as charity subjects too poor to buy antitoxin or to pay for the services of a physician; and notwithstanding the established opinion that early treatment is absolutely essential to the best results, 52 cases were not injected until the third day, 50 on the fourth, and 33 after the fourth day. These were, therefore, by no means selected cases, and in every instance the diagnosis was verified by a bacteriological examination.

The physicians who do this work are all reputable members of the Chicago Medical Society, and, with one or two exceptions, all hold responsible positions as instructors in medical colleges.

In concluding his paper, Dr. Jaques says: "I think the profession will agree with me that we have as much diphtheria in Chicago as ever before, and that it is just as malignant; but that it has been more successfully treated than ever before is demonstrated by the reduced death-rate. Those patients who do not receive the proper treatment die in the same proportion as heretofore."

DIPHTHERIA MORTALITY IN DENVER—SOME FIGURES WITH A MORAL.*

	Year.	Cases.	Deaths.	Mortality per cent.
Before Antitoxin was discovered	1888	.....	120	.....
	1889	233	109	46 5
	1890	720	277	38.6
	1891	468	175	37 4
	1892	300	89	29.7
	1893	318	106	33.3
	1894	233	71	28 7
Antitoxin introduced	1895	248	40	16.1
Treated *with* Antitoxin (various brands)	.....	123	9	**7 3**
Treated *without* Antitoxin	.....	125	31	25 1
	1896	246	19	7.7
Treated *with* Antitoxin (principally of an Eastern brand)	.....	107	7	**6.5**
Treated *without* Antitoxin	.....	139	12	8.7
	1897	297	43	14.5
Treated *with* Antitoxin (P., D. & CO.)	.....	147†	6	**4.1** (!)
Treated *without* Antitoxin	.....	150	37	24.6

*We assume full responsibility for these figures and vouch for their accuracy.—PARKE, DAVIS & Co.

†Parke, Davis & Co.'s Serum was used exclusively in these 147 cases.

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The antitoxin used in all the cases reported was of our manufacture.

In this connection we call attention to the diphtheria mortality in Denver, Col., as published in the official monthly report of the Bureau of Health of that city, for August, 1898.

We desire particularly to invite consideration of the fact that the type of the disease which prevailed in Denver in 1897 was more malignant, and was attended with a higher mortality, than that of 1896.

In 1896 the total number of deaths from diphtheria was only nineteen, a mortality of 7.7 per cent. Of 107 cases treated with antitoxin that same year, principally of an eastern brand, seven died, or 6.5 per cent, a mortality almost equal to the general death-rate from diphtheria.

But in 1897, when Parke, Davis & Co.'s Serum was used exclusively and 147 cases were treated, of these but six died, or 4.1 per cent; while of 150 cases treated without antitoxin, thirty-seven died, or 24.6 per cent.

THESE REPORTS ARE MULTIPLYING.

We have no special financial interest in our preparation of the Thyreoids, and, even if we had, we should be slow to make claims for its remedial value until we had accumulated a fund of trustworthy data from reliable sources. We are therefore impelled, singly and solely, by the increasing number of favorable reports received in our mail, to recommend that our readers try our Thyreoids in powder or capsule when treating the next case of obesity. A number of practitioners have written us of their success with this agent. Thus, under date of December 3, Dr. R. A. Patchin, Surgeon-in-Chief of the Des Moines, Northern and Western Railroad Company, informs us of his success in reducing the weight of a young woman from 183 to 170 pounds *in three weeks*, relieving also the marked dyspnea and a distressing cough. Three capsules of 2½ grains were given daily. Five weeks later she reported a still further loss, at that time weighing 165 pounds. She had been feeling so much better that she had neglected taking the capsules with any degree of regularity. No unpleasant symptoms of any kind followed their use. Dr. Patchin adds:

"I have had also under observation two cases of uterine fibroid in which the development has been arrested since the use of the Thyreoid. Both of these cases have been taking fifteen grains daily for, say, four months. In one case the growth had been rapid for a year, and an operation had been almost decided upon, when the use of thyreoids was suggested. In the other case the growth had not been so rapid, and the patient was, and is, at about the climacteric period. Neither of these tumors was bleeding or adherent. In one case the patient feels positive that there is a decrease in the size of the tumor. In the other the patient experiences a decided sense of relief from pain and the dragging, heavy sensation, which was a prominent symptom. It is too early to be positive how much benefit has been derived from the treatment in these cases, but it is only fair to ascribe to it the credit of what relief there has been afforded."

THE MOST POWERFUL DIGESTANT OF STARCH FOOD EVER AVAILABLE IN MEDICAL PRACTICE.

This is a wide claim, but it can easily be verified. No malt extract at present upon the market will digest more than five times its own weight of dry starch; under the same conditions of test Taka-Diastase will convert or digest one hundred times its weight! "Diastase of Malt," of the best German manufacture, converts, at the most liberal estimation, only fifteen to twenty times its weight of starch, whereas in the same time Taka-Diastase will convert 100 times its own weight. The price of the German Diastase should therefore be *less than one-fifth* of the price of Taka-Diastase when judged by ability to yield results.

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"OSTEOPATHY" DENOUNCED.

THE MEDICAL SOCIETY OF THE STATE OF NEW YORK AND THE TRI-STATE MEDICAL ASSOCIATION (MISSISSIPPI, ARKANSAS, AND TENNESSEE) SPEAK THEIR MINDS IN NO AMBIGUOUS LANGUAGE.

Resolutions Unanimously Adopted at the Last Memphis Meeting of the Tri-State Association.

Whereas, The medical laws of the various States have been so perverted by political influences as to give legislative sanction to grotesque, ignorant, and dangerous sects of pretenders and charlatans; and

Whereas, The privileges granted to one of the most outrageous aberrations, namely, the so-called Osteopathy, constitute a disgrace to the States in which the "osteopathists" are legally entrenched; and

Whereas, A certain William Smith, osteopathist, having been roundly denounced, together with his sect, by Parke, Davis & Co. and the *Medical Age*, now brings suit against both for $25,000 damages; therefore

Be it declared the sentiment of the Tri-State Medical Association that Parke, Davis & Co. and the *Medical Age* are entitled to the sympathy of its members and of all medical practitioners; that we wish and expect them to enjoy a complete triumph in repelling this legal assault; and that wheresoever a powerful House takes a bold stand in opposition to quackery it promotes the interests of legitimate and honorable medicine and the welfare of humanity.

Resolutions Adopted by the Medical Society of the State of New York at its Ninety-third Annual Meeting at Albany January 31 and February 1 and 2, 1899.

Whereas, We as regular practitioners of medicine are opposed to anything which under color of law can foster the operations of charlatans without medical knowledge; and

Whereas, The class of quacks known as "Osteopathists" have received legislative recognition in several States; and

Whereas, A certain William Smith, osteopathist, has been denounced together with his fellow charlatans by the *Medical Age* and its publisher, and now brings suit against both for damages in the sum of $25,000; therefore

Be it declared the sentiment of the New York State Medical Society that the Editor and Publisher of the *Medical Age* are entitled to the sympathy of the members of this Society and of all medical practitioners; that we wish them success in repelling this legal assault; that we recognize in their action a valuable effort toward the suppression of such irregularities in medicine; and that we recognize that when a medical journal and its publisher take a bold stand in opposition to quackery it promotes the interests of legitimate and honorable medicine and the welfare of humanity.

FROM "HAND TO MOUTH."

Dentists seek to keep their hands surgically clean—aseptic. This can be best done with P., D. & Co.'s Germicidal Soap. No germ of pathogenic character can live for more than a minute to a minute and a half in its lather. On the other hand, their patients should keep their teeth as aseptic as possible. This will be found an agreeable task, a pleasant part of the toilet, if Euthymol Tooth Paste is used.

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THE INTELLIGENT USE OF HEMATIC HYPOPHOSPHITES.

When it is borne in mind that our sales of Hematic Hypophosphites are governed by professional demand *entirely*, that this medicine is not ordered by the public but by physicians only, the testimony of our Sales Department becomes oracular, outweighing a thousand clinical reports, as it proves beyond question the fact that good results are everywhere following the intelligent prescription of this elegant combination.

In common with all other of our preparations, we make no secret of the formula? We assert in black and white upon each bottle and *guarantee* the ingredients of each fluidounce of our Hematic Hypophosphites to be as follows:

Potassium hypophosphite, 1½ grains.
Manganese hypophosphite, 1 grain.
Strychnine hypophosphite, ⅛ grain.
Ferrous hypophosphite, 1¼ grains.
Calcium hypophosphite, 1 grain.
Quinine hypophosphite, 7-16 grain.

ABSURD TO PRETEND THAT THESE DRUGS CAN BE CHEMICALLY ASSAYED.

As our system of physiological testing is a new departure in standardizing pharmaceutical products, it may be stated in explanation that it is based upon the rational idea of administering to animals doses proportionate to body weight, thereby producing manifestations of therapeutic activity such as we desire to produce in the human subject, but rendered relatively more intense in animals by the administration of larger proportionate doses. From the effects produced we are enabled to institute comparisons with standardized samples. Thus, in testing Cannabis Indica we administer it in the form of extract to dogs, with the result that after the lapse of a normal interval of time the action of the drug becomes manifest in the staggering gait, loss of muscular control, reduction of temperature, etc., which are followed by insensibility.

The oxytocic power of ergot is demonstrated upon pregnant animals, and the related hemostatic action is demonstrated by feeding the drug or extract to cocks, the result being that through its constrictive action upon the unstriped muscular tissue of the capillaries the comb becomes black, and in severe cases even gangrenous.

The effects of such cardiacs as Strophanthus and Digitalis are measured by administering them in fluid form to frogs and other animals, the demonstration of their action being rendered more vivid through the use of graphic tracings of the kymograph, and similar instruments. The physiological effect of other medicinal agents upon blood-pressure, the heart, respiration, and the localization of their action in the nerve centers, walls of the blood-vessels, and in the nervous or muscular elements of the heart or other organs, are determined by the use of special apparatus.

A UNIQUE IRON TONIC.

The fact that an iron tonic can now be given with diastatic ferment, which is usually so intolerant of such companionship, is certainly an aid in therapeutics. In many cases of anemia requiring an iron preparation there is also indigestion of the carbohydrates, and no one mixture of remedies for these indications has been hitherto available. This is made possible by our Solution Iron Peptonate and Manganese, a preparation of organic iron. It will mix and is therapeutically compatible with our Liquid Taka-Diastase, so that in one prescription may be incorporated the most readily assimilated iron with the strongest starch digestant at present known. We invite a trial where both remedies are indicated.

A Pure Astringent.—Dr. Roswell Park, of Buffalo, N. Y., writes us under date of May 20, 1898: "I want to tell you I use occasionally the extract of suprarenal capsules you sent me over a year ago, with the greatest satisfaction, when I want a pure astringent."

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REPORTS.

What a Dentist Says of Euthymol Tooth Paste.

"Never before have I had a paste that I would care to advise others to use."—A. VAN ARK, Rooms 805-7, The Spitzer, Toledo, O.

The Intestinal Indigestion of Children.

Dr. Alvis, of Ardmore, Indian Territory, states that nothing will take the place of Taka-Diastase and Bismuth Subnitrate equal parts.

Flatulence and Constipation.

Have had remarkable results in several cases of intestinal indigestion, with consequent bloating and constipation, by use of Taka-Diastase.—F. J. BOVARD, M.D., Tionesta, Pa.

Ergot in Desperate Cases.

I have used your Aseptic Ergot and have nothing but the highest praise for it, in respect both to safety and to certainty of action, in the most desperate cases.—M. R. MORDEN, M.D., Adrian, Mich.

Fifty-two Cases of Diphtheria.

Out of fifty-two cases treated with your Antidiphtheritic Serum I have not lost a single patient. This report embraces the experience of eight months ending December 10, 1898.—HARRY W. DUGENT, M.D.

Very Little Genuine Berberis.

There is a continual demand for Berberis Aquifolium, but it seems for some reason or other very little of the genuine root has been gathered this season.—JOHNSON-LOCKE MERCANTILE CO., San Francisco, California.

Fifty Cases Are No Bagatelle.

I have used Dr. Woodbridge's Treatment of Typhoid Fever in about fifty cases and have not lost a single patient. I am fully convinced that it affords the only means with which we can cut short an attack.—H. P. SMOCK, M.D., St. Mary, Ky.

The King of Tonics and Reconstructives.

I have found Parke, Davis & Co.'s Egg Emulsion of Cod-Liver Oil a most satisfactory preparation, rendering palatable and acceptable to the most fastidious taste that king of tonics and reconstructives.—HENRY G. LAMB, M.D., Sandy Lake, Pa.

No Complications.

In the last two months I have treated eight cases of typhoid; no evil complications, no restriction of diet; had patient well in less than three weeks. I can cheerfully recommend Dr. Woodbridge's Treatment, and shall use no other.—CARL F. BACHMAN, M.D., Allegheny, Pa.

What Genuine Ergot Will Do.

I am doubtful if I ever obtained any physiological effects from Ergot before using the Ergot Aseptic, P., D. & Co. I was given a few samples at the Denver meeting of the A. M. A.; I used them all, and I obtained prompt action every time.—C. C. HERSMAN, M.D., Pittsburg, Pa.

For Suppressed Menstruation.

A patient who had not menstruated for several months became alarmed and wrote me for advice. I recommended Solution Iron and Manganese Aromatic (P., D. & Co.) in doses of one tablespoonful, t. i. d. In fifteen days menstruation was perfectly restored, to the patient's great delight.—DR. J. M. KAISER, Somonauk, Ill.

We Claimed Only 750 Units.

Incidentally I would also state that in the Laboratory here I have made a test of your Antitoxin and that the 750 unit Antitoxin ran by my test to 800 units. The work will appear in our annual report some time the coming summer.—WILLIAM C. MITCHELL, Bacteriologist Denver Health Department, City Hall, Denver.

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Euthymol Cream in Pruritus Ani.

During the past three years I have suffered the torments of Hades ten thousand times from pruritus ani and have used everything without success. I am now using your Euthymol Cream, with the most happy results. It relieves that intense itching and renders slumber quiet and peaceful.—G. A. BUDD, M.D., Gratz, Ky.

"The Profession Owes It a Good Trial."

I am particularly anxious to learn all I can about your Nuclein Solution. I have used twenty or twenty-five pounds of your Solution No. 2; in some of the cases I have had a phenomenal result. The profession owes it a good trial. I hope in the convenient future to make a report of my findings.—H. WELLINGTON YATES, M.D., Detroit, Mich.

Gaining Weight.

Before beginning the use of Parke, Davis & Co.'s Egg Emulsion of Cod-Liver Oil I tried almost every emulsion known without obtaining the desired effect. Under the use of Egg Emulsion I am gaining weight fast, and I recommend the product to all my patients who need building up.—F. S. VAN PELT, M.D., Augusta, Ga., Oct. 17, 1898.

Six Cases of Diphtheria.

I have recently employed your Antitoxin in six cases of diphtheria. All the patients made a speedy and uninterrupted recovery. For prompt action the serum more than equaled my most sanguine expectations. Each case showed marked improvement within two hours after injection. I have used your products extensively for several years, and always find them efficient and reliable.—C. T. BRONAUGH, New Ross, Ind.

In Lithemic Dyspepsia.

During the past two years I have used Taka-Diastase constantly. In every case of amylaceous or lithemic dyspepsia, where all other ordinary digestive agents have failed, Taka-Diastase has been perfectly satisfactory. I believe it is a valuable therapeutic agent, both prophylactic and curative, in the treatment of lithemia in all its forms. Taka-Diastase has made every general practitioner your debtor.—DR. J. FRANK FORD, Omro, Wis.

"Prompt and Marvelous Results."

I purchased the capsules of Taka-Diastase and used them on myself with prompt and marvelous results. I had been on liquid diet for three months and had eaten no meat or solid food. After beginning with the capsules of Taka-Diastase, within three days I was eating everything and digested it with comfort. My case was one of amylaceous dyspepsia and a result of neurasthenia.—W. N. SHERMAN, M.D., F.R.M.S., Merced, Cal.

"The Action was Wonderful."

I have used Parke, Davis & Co.'s Special XX Antitoxin with grand results. In one case of diphtheritic croup that I am now treating, where I used two injections of XX No. 4, 2000 units (Parke, Davis & Co.), twenty-four hours apart, the action was wonderful. I had given up all hope of saving the little patient. I shall never use anything but Parke, Davis & Co. XX in these cases.—W. H. BADGER, M.D., 1443 East Grand Avenue, St. Louis, Mo.

A Neat Way of Administering Bitter Cascara Sagrada.

I have my patients provide themselves with a medicine dropper, some No. 1 empty capsules, and an ounce or two of your Cascara Sagrada. At bedtime, or when the medicine is to be taken, the patient fills the capsule with the aid of the medicine dropper, puts on the cap, and swallows the capsule. I always get good results and have no complaint about the bitter taste. I like this plan better than using Aromatic Cascara, as the bitter fluid extract is more certain to yield results.—B. F. LORANCE, M.D., Brock, Nebraska.

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In Malarial Complications.

I have been prescribing your preparation of Elixir Gentian and Iron Chloride with splendid results in malarial complications. In one case of vomiting in pregnancy, complicated with purpura hemorrhagica, the vomiting ceased after the first dose and never recurred—there has not even been nausea since. This case might interest some of the readers of THERAPEUTIC NOTES, from which I get many good points.—D. L. NEWTON, M.D., Fort Madison, Iowa.

Two Years' Experience with Serum.

I have used your Antidiphtheritic Serum for the past two years exclusively. Out of fifty-four cases in which antitoxin was used, fifty-two of the injections were made with antitoxin obtained from your laboratory. There were two deaths. I was strongly criticized on account of a fatality which occurred a year or so ago, but I have overcome most of the obstacles, and to-day three of our four physicians are using the serum.—C. E. COOK, M.D., New London, Iowa.

283 Vaccinations—Only Nine Failures.

We are going through a smallpox epidemic at this place, and I am using P., D. & Co.'s sterilized glycerinated Vaccine Virus. In 283 vaccinations only nine proved unsuccessful, and of these nine seven had been vaccinated from five to fifteen years before and exhibited old scars. I have had very few bad arms. I apply Parke, Davis & Co.'s Euthymol. It is one of the best remedies for the inflammatory stage that I have ever used.—JOHN T. CHAPMAN, M.D., Selma, Ala., Jan. 27, 1899.

Patient or Drug?

Allow me to express my gratification at your methods of standardizing and testing physiologically the fluid extracts you send out. In past years I have always had to ask myself whenever I failed to get a desired effect: Is it the patient or the drug that is at fault? Now that I can trust the drug I can move more knowingly. When the profession come to realize the power given them by this knowledge of an unvarying drug strength, therapeutics will assume a new aspect and will move on toward the goal of an exact science.—H. W. HEATON, M.D., Olneyville, R. I

Rational Treatment of Typhoid.

In the course of his presidential address, T. I. Wilson, M.D., Walnut Ridge, Ark., President of the Tri-State Medical Association (Memphis, Dec. 15 and 16, 1897), states that "in the treatment of typhoid fever, confidence seems to be stronger in the efficiency of antiseptics that are supposed to enter the intestine in such degree of potency as to destroy the bacillus. The plan of Dr. Woodbridge, who has endeavored to systematize this method, is being quite extensively tried, and with many favorable reports. Whatever remedy or formula is used, this, in accordance with our present knowledge of the disease, is the most rational and promising treatment."

Twenty-three Cases of Diphtheria.

The recent generous cut in the prices of Parke, Davis & Co.'s serum has brought it where it is possible for all to secure it; the profession as well as the poor appreciate it. During the present month I have used it in twenty-three instances, and in all with most gratifying results. In eight bad cases of diphtheria, four required a second injection. All responded promptly to your serum, and though two patients did not receive it until the fourth day of the disease, all made thorough and prompt recovery.

During the present month I have immunized three families of seven persons, and, though unavoidably exposed to infection, all escaped. My practice is to use serum on my first visit to a case of diphtheria, and I believe in giving more than a medium quantity, especially in neglected cases.—JOHN KURTZ, M.D., Washington, D. C., October, 1898.

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GLEANINGS.

Pichi Was of Value.—In the *Therapeutische Monatshefte* for May, 1898, appears an article by Dr. Oscar Werler, a specialist in skin diseases at Berlin. Referring to long-continued cases of cystitis and gonorrhea, with enfeebled digestion, Dr. Werler observed good results to follow the use of fluid extract of Pichi (*Fabiana imbricata*) as manufactured by Parke, Davis & Co.

A Well Known Physician's Experience.—Speaking at the Nashville meeting of the Mississippi Valley Medical Association, regarding the use of antistreptococcic serum, Dr. Charles L. Minor said "his experience had been practically confined to secondary infections in tuberculosis. He had used the antitubercle serum of Parke, Davis & Co. with considerable satisfaction in preference to Marmorek's." —*Medical News.*

"Pointer" for Syringe Users.—I know that those who have occasion to use a syringe infrequently are at times seriously embarrassed by reason of finding it useless on account of the drying of the plunger. Merely keeping the cap on the syringe will not obviate the difficulty. I find the best way to keep a syringe ready for use at all times is to keep the barrel filled with water. This is easily done by reversing the manner of filling the syringe.—T. SPRAGUE, M.D., Sheffield, Ill., Nov. 2, 1898.

The Vomiting of Pregnancy.—Homer O. Bates, M.D., Professor of Abnormal Labor in the Playfair School of Midwifery at Chicago, has had remarkably pleasing results from the use of Taka-Diastase in an obstinate case of vomiting of pregnancy, after having tried all means known and recommended by the best authorities. As other practitioners have favored us with similar reports, we deem it our duty to recommend that the readers of the NOTES give Taka-Diastase a fair trial when confronted with this very distressing condition.

European Indorsement of Taka-Diastase.—Strauss & Stargardt have submitted this starch-digestant to thorough chemical and clinical investigation. They assert that it exerts an "intense and immediate" action upon starch-paste, converting it into sugar almost instantly. They found Taka-Diastase to help digestion for a short time (less than fifteen minutes) after eating, before the gastric secretion reached the normal degree of acidity and inhibited its further action. Taka-Diastase in no way injures the salivary ferment, and experiments proved that the two exert their influence side by side.—*Therap. Monatsch.*, 12, p. 65.

Constitutional Treatment for Tubercular Throat.—In a paper by Dr. J. S. Mott, on "Treatment of Tuberculosis of the Throat" in the *Kansas City Medical Record*, the satisfactory results of a line of treatment therein indicated are briefly commented upon. After speaking of the local treatment the reader is informed that the constitutional treatment consisted in the administration of Parke, Davis & Co.'s compressed tablets of Guaiacol and Hypophosphites Compound, resulting in "such improvement that," in the particular case mentioned, "the patient is gaining in weight, with increased appetite and advancing convalescence."

A Case of Tetanus.—Prof. P. E. Archinard, M.D., New Orleans, La. (*New Orleans Medical and Surgical Journal*, January, 1898), reports a case in the practice of Dr. Gustine, of Kennerville, La., Prof. R. Matas in consultation.

The patient was a white male, 12 years old, son of a dairyman. Source of infection, splinter in foot. Period of incubation, about four or five days, certainly less than a week. When seen, July 10, 1896, trismus and opisthotonos marked; general convulsions readily excited. Treatment: Splinter removed; chloral and bromide administered; injections of antitetanic serum (Parke, Davis & Co.) hypodermatically—three in all. Continuous uninterrupted recovery, attributed by observers to the use of serum.

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Hydrastis, represented by the white alkaloid hydrastine,	60 grains.
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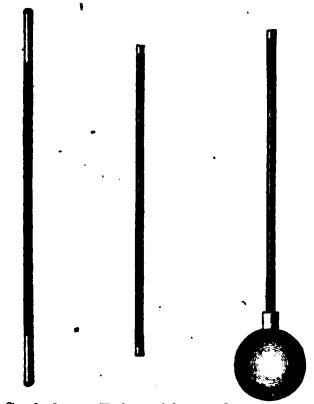

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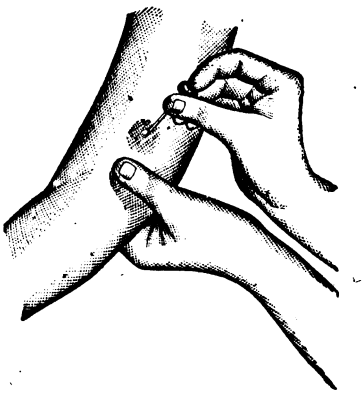

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Therapeutic Notes

PUBLISHED BY PARKE, DAVIS & CO.,
DETROIT, MICH.

No. 2. Sixth Year. May, 1899.

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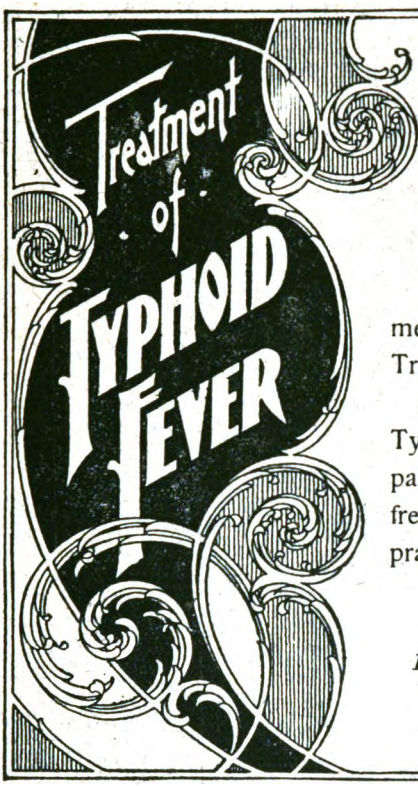

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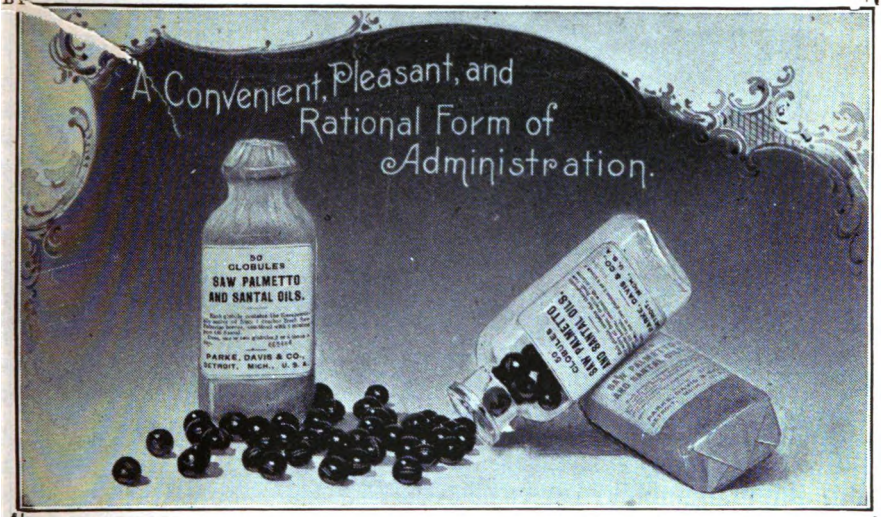

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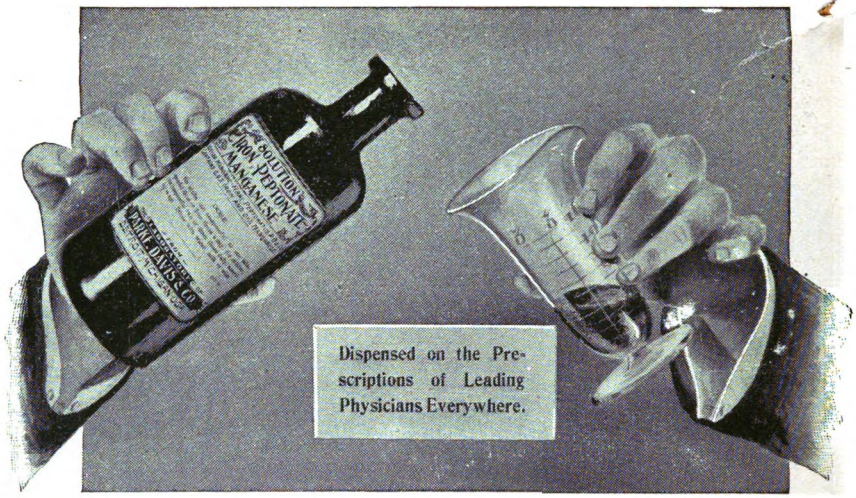

In our Solution Iron Peptonate and Manganese we offer to the medical profession a combination of exceptional value in the treatment of anemic conditions, where the digestive and assimilative functions of the patient are impaired.

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Therapeutic Notes

SIXTH YEAR. DETROIT, MICH., MAY, 1899. No. 2.

THERAPEUTICS.

STARCH DIGESTION IN THE STOMACH.*

BY PROF. A. E. AUSTIN, A.M., M.D., BOSTON, MASS.

It has been usually supposed that the diastatic digestion of starchy food in the stomach is interfered with by the hydrochloric acid of gastric juices within a short time after each meal. I have undertaken to make a systematic research on this important physiological function. For the purpose of studying the relative functions of starch and diastase, Taka-Diastase was used, for its amylolytic power is remarkably strong as well as stable. From the results of the experiments the following facts seem to be well established:

Taka-Diastase digests starch with remarkable rapidity in a neutral or slightly acid medium, in which it is capable of digesting 300 times its own weight of starch in one hour.

The digestion of starch by Taka-Diastase is accelerated by the presence of a small quantity of free HCl.

The digestion of starch by Taka-Diastase is not interfered with by organic acids; on the contrary, the presence of a small quantity of organic acid favors the diastatic digestion of starch.

Albuminous foods combine with or neutralize free HCl of gastric juice. The combined acid has no inhibitory action on diastatic digestion by starch.

In the human stomach the albuminous matter of the food combines with the HCl of the gastric juice as fast as it is formed, and such combined HCl has no hindering action on starch digestion. The diastatic digestion of starchy food is practically completed within one hour.

Reprints of Dr. Austin's original paper will be promptly sent to any physician who may be interested in this topic.

*Condensed from a fine paper in *Boston Medical and Surgical Journal*, vol 140, No 14.

SERUM TREATMENT OF PUERPERAL SEPTICEMIA.

BY T. E. TAYLOR, M.D.,
Professor of Obstetrics, University of Colorado.

Since reading the first reports of the use of the Antistreptococcus Serum in septicemia, I had wished for an opportunity to test it, which I found in November, 1897. The case was one of septicemia in a primipara who had a quick labor without any laceration of the perineum, and with a moderate tear of the cervix.

November 30. Pulse 118, temperature 101°; complained of chilliness; bowels not moved, urine retained, abdominal tenderness great, moderate tympanites. Injected ten cubic centimeters Antistreptococcic Serum (P., D. & Co.'s).

December 1. Morning pulse 106, temperature 100½°; sweating; tenderness less. In the evening pulse was 100, temperature 100°; felt much better, ate more; urine and feces passed normally.

December 2. Pulse 115, temperature 102°. I injected ten cubic centimeters of serum again. In the evening found the pulse 100, temperature 99½°, and patient feeling better. From this time the patient made a steady recovery and was able to leave her bed in two weeks. Her desperate condition had improved so noticeably and promptly after each injection that I could not but credit her improvement to the new agent.—*Colorado Medical Journal.*

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THREE CASES OF PERSISTENT EPISTAXIS.*

BY DR. T. EDWARDS CONVERSE.

Case 1.—Miss A. M——, white, aged 19, a robust, healthy woman, suffering from a slight continuous hemorrhage from the right side of the nose which seemed to be more venous than arterial. All efforts to control the bleeding by the patient and by myself proved unavailing. Recognizing the action of ergot on unstriped muscular tissues, and especially erectile tissue, I injected ten minims of Aseptic Ergot (Parke, Davis & Co.'s), allowing it to slowly diffuse into the tissues of the turbinate as the syringe was withdrawn, and in five minutes the hemorrhage had diminished, and in half an hour had stopped entirely, and did not recur.

Case 2.—A chronic bleeder came to my office with epistaxis, and I found the inferior turbinated body on the right side covered with an oozing hemorrhage primarily started by a scratch with a match. Pressure and astringents had no effect, and I used the Aseptic Ergot again, using ten minims and injecting it deep into the turbinate; but the hemorrhage continued, and after two hours I used another ten minims, when it stopped in half an hour and did not commence again.

Case 3.—Hemorrhage from both sides of the nose. Patient gave a history of vicarious menstruation lasting for a day or two. I gave her a teaspoonful of fluid extract ergot, and told her to repeat the dose in two hours if the hemorrhage did not stop. She had to repeat the dose, and it stopped, and she did not have any more hemorrhages from the nose.

In the discussion which followed Dr. Gossett said: "The stopping of the hemorrhages was unique if nothing else, and the Doctor has given us a very interesting paper on the subject. Ergot has been used hypodermatically, but I would like to ask the Doctor why he preferred the Aseptic Ergot instead of some of the other preparations?"

Dr. Converse (closing the discussion): "In response to Dr. Gossett's question I will say that in almost every case in which I have used —— I have had an abscess, and have discarded it as much as possible for that reason, for if a bottle of it is opened, even for a very short time, it becomes infected. The Aseptic Ergot comes in sealed bottles, each holding just about the right amount for an average dose, and is therefore always aseptic."

*Abstract from a paper in the *Louisville Journal of Surgery and Medicine.*

PAINFUL AND TEDIOUS LABORS MAY BE PREVENTED.

BY E. J. KEMPF, M.D., JASPER, INDIANA.

Case 1.—Mrs. S—— had given birth to nine children; four of these were still-born after very tedious labors. Twice turning *in utero* had to be performed before labor could be completed; twice forceps had to be used; once craniotomy had to be resorted to in order to save the woman's life; and all the labors were tedious and prolonged.

During her *tenth* pregnancy Mrs. S—— took Liquor Sedans, a teaspoonful three times a day, for several months, up to the day of her confinement, and the result was remarkable indeed. The labor was in every way a normal one, and the woman blesses Liquor Sedans.

Case 2.—Mrs. K—— had given birth to three children. I attended her in the three labors. The first and second were very tedious labors, and the third a most difficult one. Forceps were used in the three labors.

During the fourth pregnancy, the woman took Liquor Sedans, a teaspoonful three times a day, for a number of months, taking it up to the very day of her confinement. The labor was normal, easy, and the patient was delighted with the result, due to her faithful use of the medicine.

Two cases in which this medicine proved of such remarkable benefit mean something, and the reason I report the cases is, if possible, to induce other practitioners to give the remedy a trial in similar cases.—*Medical World.*

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ANTISTREPTOCOCCIC SERUM IN PUERPERAL FEVER—A CASE.

BY JOHN MADDEN, M.D.,
Professor of Physiology in the Wisconsin College of Physicians and Surgeons, Milwaukee, Wis.

A thin, nervous woman miscarried in the second month of pregnancy; a portion of the ovum was retained, became infected, and all the symptoms of severe poisoning were present. Notwithstanding the fact that the uterus was thoroughly curetted, wiped out with equal parts of tincture of iodine and carbolic acid and packed with iodoform gauze, the temperature remained at 105° F. Ten cubic centimeters of Parke, Davis & Co.'s serum was injected between the shoulders on Saturday evening, twenty-four hours after curettement had been done. The next morning the temperature was 102° F., from which point it again gradually arose until it reached 105° F. on Tuesday evening. The dose was repeated and was followed by a fall to 101° F. the next morning. On Thursday morning the temperature was 99° F., and rapid convalescence and recovery followed. This patient was seen in consultation with me by a well known and conservative physician of this city, and he expressed the opinion that the serum undoubtedly saved her life.—*Journal of Scientific Medicine.*

HEMORRHAGES IN PREGNANCY AND LABOR.

BY C. E. PADDOCK, M.D.,
Professor of Obstetrics, Chicago Post-Graduate Medical School.

In the course of a very valuable paper upon the above topic the writer says: "Do not use haste in the delivery of the placenta, and administer Ergot at the completion of the third stage of labor. The Aseptic Ergot as furnished by Parke, Davis & Co. can be used hypodermatically without the least danger of forming an abscess. It comes hermetically sealed and is thoroughly reliable."—*Western Clinical Recorder*, January, 1899.

WE RECALL THE VISIT WITH GREAT PLEASURE.

When the Ontario Medical Association visited the establishment of Parke, Davis & Co. a year or two ago, its members (says the *Canada Lancet*) were particularly impressed with the completeness and magnitude of the bacteriological and pharmacological laboratories. These have since been increased fivefold in capacity and outfit. Here was made the first American diphtheria antitoxin that was offered on this side of the Atlantic. Their superior product of this article—the finest in the world—is well worthy of the immense department equipped for this special purpose. Provided with all modern paraphernalia, powerful microscopes, huge incubators, sterilizing apparatus, extensive stables and animal laboratories, this branch of enterprise is prepared to keep abreast of the latest discoveries in bacteriological science. They are now engaged in the production of several antitoxins—of diphtheria, tetanus, streptococcus, etc. Their diphtheria antitoxin enjoys the enviable distinction of never having caused a fatality or serious casualty of any kind, and its record in reducing the mortality of this dread disease is unparalleled by any other similar preparation on the market.

A Remedy for Tinnitus Aurium.—Dr. Mendel, in the *Journal des Praticiens*, says that in patients for whom fifteen to twenty drops of Fluid Extract Cimicifuga Racemosa had been prescribed for tinnitus aurium, there was benefit in a fair proportion of the cases. When effective, it is very rapid in its action, arresting the tinnitus for the time being for at least two or three days. In the treatment of headache arising from eye strain, Cimicifuga Racemosa is said to be very useful.

To physicians who wish to make a trial of the remedy in these conditions we recommend our Fluid Extract Cimicifuga Racemosa. It contains the active constituents of the drug which it thoroughly represents.

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SCARLET FEVER TREATED WITH ANTISTREPTOCOCCIC SERUM; RECOVERY.

BY E. M. LANDIS, M.D., CHICAGO.

I was called to see a child who had been ill for four days, and found I had to deal with a grave case of scarlet fever. The characteristic symptoms were present, and the subsequent course of the disease was severe. The temperature eventually reached 106.5° F.; the child became very drowsy and refused to take food. With the consent of the parents I then decided to use the Antistreptococcic Serum of Parke, Davis & Co., and injected, under strict asepsis, ten cubic centimeters, about 9.30 A.M. The result was surprising. The temperature fell to 100°, the discharge from the nose and ears lessened; the child grew bright and partook of food. Three days later, the temperature having reached 102.5°, with the ears again discharging freely, I injected ten cubic centimeters more of the Serum, with a result equally as gratifying as in the first instance. From this time on the temperature did not rise above 100°, and in a few days became normal.

I was unable to discover any unpleasant symptoms following the use of the Serum, while I observed that the sites of the injections were not as tender as when antitoxin is used, and I consider the result in this case convincing.

INTRAVENOUS SALINE INJECTION.

"Do Not Let the Patient Die While the Solution is Being Sterilized."

An article in the *New York Medical Journal* detailing some original experimental work by J. O. Cobb, M.D., of the U. S. Army, shows that this procedure is of the first importance in the treatment of hemorrhage. The instruments needed are few. The cannula should be connected to the container of the saline solution by about two yards of clean rubber tubing. Any graduated vessel, such as a large funnel or bottle, will do. Dr. Cobb says: "Do not let the patient die while the solution is being sterilized. It is an easy matter to be prepared for an immediate saline injection, for Parke, Davis & Co. are now preparing a sterile normal saline solution, put up in ounce bottles, which, added to the necessary amount of water, makes the solution ready for instant use." Dr. Bosc, of Montpelier, has advised the employment of bleeding, followed by the injection of physiological salt solution, in the treatment of pneumonia, uremic convulsions, Asiatic cholera, and poisoning by illuminating gas.—Editorial in the *Canadian Journal of Medicine and Surgery.*

PHOSPHORUS PILLS WHICH DO NOT DETERIORATE WITH AGE.

A Simple but Striking Experiment.

Phosphorus exists abundantly in the bones and in the nervous system. Upon the latter it acts, according to Pepper, as a stimulant, promoting intellectual activity and increasing the sexual appetite. It is also a nutrient tonic to the osseous tissues, causing great increase in the size of the bones when administered to young animals.

In medical practice phosphorus should be given in the form of a pill, either sugar- or gelatin-coated. On account of its tendency to oxidize readily on contact with the atmosphere, it is a very difficult matter to make a permanent pill of phosphorus. We adopted a number of years ago a formula which enables us to incorporate and retain this evanescent element unimpaired in our pill mass. A simple little experiment in support of this claim is made by cutting in half one of our Sugar-coated Pills of Phosphorus and scraping the surface of the mass with the knife-blade. At once the familiar odor of the drug will be apparent and the characteristic white vapor of P_2O_3 will be given off as a result of its exposure to the air. This phenomenon effectively demonstrates the fact that the impervious coating with which our pills are invested preserves the phosphorus until liberated in the stomach.

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EXTRACT FROM "DIAGNOSIS AND TREATMENT OF DISEASES OF THE STOMACH."

BY PROF. J. BOAS, M.D., BERLIN, GERMANY.

Under the name of Taka-Diastase the firm of Parke, Davis & Co., Detroit, has put upon the market a new starch-converting substance. It appears as a yellowish-white powder, soluble in water. It has the advantage over other such ferments of retaining its power in the presence of a higher percentage of acid. While ptyalin and malt diastase lose their property of transforming starch into sugars in the presence of .01 per cent HCl, Taka-Diastase, according to Leo, still retains the power to convert about 60 per cent of starch into sugar in the presence of .05 per cent of HCl. Therefore Leo advises Taka-Diastase in cases of hyperacidity.

J. Friedenwald has lately made a very favorable report on the properties of Taka-Diastase. He found that it has a tendency to increase the secretion of gastric juice and hasten the digestion of starch.

Taka-Diastase works best in cases of hyperacidity, and is able to replace the saliva if this be diminished or absent.

GRATIFYING SUCCESS IN CASES OF AUTOINFECTION.

In the treatment of a case of cryptogenetic infection, Dr. J. H. Hoelscher, Professor of Internal Medicine in the Chicago Clinical School, employed the following method: Enemas of water with small quantities of salt; hypodermatics of strychnine and double chloride of gold. Once daily a dose of Vaughn's nuclein solution, 5-per-cent, as prepared by Parke, Davis & Co. The nuclein was followed by considerable general and local reaction, and in the course of a week patient had gained strength, his pulse was stronger, the heart sounds could be heard, and a systolic murmur in the mitral area was noticed. The dose of nuclein, which was given hypodermatically, was increased from day to day. Proper attention was given to the nourishment, and in October he had fully recovered.

In another case the temperature pursued a remittent course, low in the morning and always high in the evening; chills and sweats were of irregular occurrence. The highest temperature was 105° F. No change in the fever took place until he administered Parke, Davis & Co.'s nuclein hypodermatically. This treatment was adopted April 14, about eight weeks after the onset, ten minims every four hours, and increased from day to day up to April 22. Since its use the temperature lessened, and the general condition was so far improved that the nuclein was stopped. April 24 patient had a sharp chill, followed by a high temperature and an increase of nodular eruptions; in short, there appeared to be a relapse.

Began the use of nuclein solution, 5-per-cent, at once, and this was followed by a marked improvement. April 16 he appeared to be convalescent. Profiting by former experience, the nuclein was again given in smaller doses. The temperature at this time did not exceed 101° F.—*Chicago Clinic.*

USEFUL IN CORYZA AND ACUTE CATARRHAL INFLAMMATIONS OF THE RESPIRATORY TRACT.

Remedies which check mucous discharges may properly be called "Blennostatics," according to Gould's Medical Dictionary. Cinchonidine Dihydrobromate possesses this property and is therefore highly recommended as a remedy in coryza. It is recognized in the French Pharmacopœia. We have placed upon our list, and are prepared to supply, Pill No. 865, Blennostatic, which contains three grains of the Dihydrobromate of Cinchonidine. We recommend this pill as worthy of trial in the treatment of that very annoying and often severe affection popularly known as "cold in the head." In order to avoid mistakes prescribers should invariably specify P., D. & Co. when ordering Pill Blennostatic.

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TREATMENT OF ENURESIS IN CHILDREN WITH THE FLUID EXTRACT OF RHUS AROMATICA.

Freyberger has used this drug with great success in some thirty cases (*Treatment*). In all cases spoken of as "cured," at least nine months has elapsed since enuresis occurred for the last time. The average duration of the treatment was forty days. Rhus Aromatica appears to be as efficacious as belladonna; it may be given for a long time without the slightest ill effect, and good results may be obtained with it where belladonna proves ineffective. The dose employed by Freyberger varied from five to twenty minims, according to the ages of the children, which ranged from two years upwards. A very convenient formula is the following:

℞ Extracti Rhus Aromaticæ Fl., P., D. & Co., ♏ x.
Syrupi Aromatici, ♏ xx.
Aquæ destellatæ, q. s. ad ʒ j.

M. Sig.: This amount to be given three times daily.

LUBRICANTS IN OBSTETRICAL PRACTICE.

BY W. B. YOUNG, M.D., BON AIR, TENN.

[Abstracted from an editorial in *The Country Doctor*.]

I wrote Dr. McClintock in regard to using his soap as a lubricant in obstetrical practice. From the literature I have examined, this soap, or rather this disinfectant, is certainly a great boon to general practitioners, and more especially to country physicians who often have to deliver women in log huts where bowls and pitchers are unknown. The proper disinfection and lubrication of my hands in obstetrical work has been a great annoyance to me. Sometimes I used carbolic acid, then changed to bichloride, and for the past few years I have been using permanganate of potash and oxalic acid to disinfect the hands. However, these did not supply the sterile or germicidal lubricant much needed in primiparal and many other cases.

In the *Medical News* of April 17, 1897, I read a paper from Dr. McClintock in regard to Germicidal Soap, giving a method which struck me as the ideal manner of preparing the hands in obstetrical and gynecological work. I exhibited a sample of the soap to the members of the Upper Cumberland Medical Society. It was then put up in little rolls, but since that time Parke, Davis & Co. have succeeded in manufacturing it into cakes suitable for carrying in the grip. I think it just to the members of the Upper Cumberland Medical Society that they be informed in regard to the latest development of this new germicide.

SIXTEEN CASES OF SERUM-TREATED DIPHTHERIA.*

BY W. W. LAMBERT, M.B., B.C., CANTAB., M.R.C.S., L.R.C.P.,

President of the College of Physicians and Surgeons of British Columbia, Kamloops, B. C.

The table of my cases shows that sixteen cases in all were treated and thirteen persons immunized. All these, with the exception of one, were taken early, and all made a speedy and uneventful recovery. Relief of the symptoms was very rapid, and complete cure ensued in from twenty-four hours to two and three days. In no case did the first injection fail of its effects; the temperature was reduced and the membrane began to disappear. Not a single case has as yet been followed by either postdiphtheritic paralysis or by nephritis. The antitoxin used was obtained from the Biological Department of Parke, Davis & Co., and bore the dates of October 22, 1898, and November 21, 1898; both seemed equally efficient.

Chaparro Amargoso in Chronic Dysentery.

I obtained one pound of your Fluid Extract Chaparro Amargoso about a year ago. I found it to be all you claimed for it in the treatment of chronic dysentery. I am using it right along in my practice. —WILLIAM A. JAMES, M.D., Chester, Ill.

*Abstracted from the *Montreal Medical Journal*, vol. xxviii, No. 3.

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A NEW SEDATIVE AND ANODYNE.

BY HIRAM H. HOWE, M.D., PATRIOT, O.

I desire to state that I have just recently employed Parke, Davis & Co.'s Fluid Extract Passiflora Incarnata in two instances with most marked and happy effects. The first was a case of functional heart disturbance where the pulse was 108 per minute and the impulse of the heart so violent as to occasion very great apprehension on the part of the patient. Forty-five drops of your Fluid Extract Passiflora produced such marked relief and in such a short space of time that I could scarcely credit it myself. In less than twenty minutes the pulse was working nicely at 74, and in about one hour my patient was sleeping. This transpired in a case of neurasthenia. The second case was one of dysmenorrhea, in which from 45 to 55 drops at intervals of one or two hours controlled the pain. In this last case I had been put to my wits' end, as the young lady (17 years of age) suffered terribly and never had been able to take any of the preparations of opium on account of opium sickness. In both these cases there were no bad or unpleasant after-effects.

TWO CASES OF SIMPLE GOITRE SUCCESSFULLY TREATED.

BY E. P. CLEMENT, M.D., GRAFTON, OHIO.

Case 1.—Multipara, 28 years old, well developed. She gave a history of a gradual enlargement of neck for one year. I diagnosed it as simple goitre and began treatment at once. I gave one tablet of Thyreoids (P., D. & Co.), representing five grains of fresh gland, three times a day; topical application of tincture of iodine often enough to keep up local irritation, and phosphate of sodium, daily, to keep the bowels free. After five weeks' treatment the gland was reduced to the normal size and there was no recurrence.

Case 2.—Miss Anna B——, 22 years old. Neck had been enlarging for six months. I diagnosed simple goitre and began treatment with Parke, Davis & Co.'s Thyreoids, five grains, three times a day; tincture of iodine locally, and phosphate of sodium to keep bowels soluble. Complete cure after four weeks.

I could relate several more cases of complete cure and no failures. In some cases tincture of iodine in full strength causes pain. If so, reduce, or use a saturated solution of potassium iodide.

INFANTILE DIARRHEA AND INANITION.

BY JOHN S. WOLFF, M.D., ALMA, S. C.

Some time ago I had occasion to treat a little twin child artificially fed. The infant was reduced to skin and bones from diarrhea and inanition. I had tried the known remedies within my reach, and all the foods, but they seemed to do no good. I happened to think of a sample of Taka-Diastase left with me by a representative of Parke, Davis & Co., and concluded to try it. I was surprised when the child appeared to improve from the very first dose. When the sample gave out, the parent obtained a little Taka-Diastase from a druggist in our town, and a continuation of the treatment has cured the child. It is now well and hearty.

I have practiced medicine continuously for forty-six years, and I have never witnessed such decided and happy effects from any medicine in so troublesome a disorder. I can recommend Taka-Diastase with a clear conscience as a complete digestant.

URTICARIA FOLLOWING SERUM INJECTIONS.

In the discussion following the reading of a paper on "Serum Therapy" at the semiannual meeting of the California Northern District Medical Society, held at Davisville, Dr. J. H. Parkinson, of Sacramento, spoke of the urticaria which occasionally follows serum injections. He recommends for the treatment of this annoying condition "the use of Syrup Iron Chloride, Weld, a preparation manufactured by Parke, Davis & Co. This preparation is easily borne by the stomach."

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AN ALTERATIVE OF VALUE.

Highly Recommended in the Treatment of Bites of Serpents.

For some years the *Echinacea Angustifolia* has been found useful in the treatment of bites of serpents. In a recent issue of the *Texas Medical News*, J. Newton White, M.D., mentions a case of a boy who was bitten three inches above the heel by a rattlesnake, both the upper and lower fangs entering the skin. The usual symptoms followed The treatment consisted in the administration of twenty-drop doses of Fluid Extract Echinacea every hour, with the local application of the same preparation on absorbent cotton. The boy was able to wear his shoe and go to school three days later.

We market a reliable Fluid Extract of *Echinacea Angustifolia*, and shall furnish literature to any physician interested in this drug.

CODEINE IN DIABETES.

For the treatment of diabetes mellitus many medicinal substances are recommended and employed by the profession, chief among which is codeine. The great desideratum in all treatment, however, is to avoid giving *any sugar or any substance that can be converted into sugar* in the alimentary canal. On this ground we have gladly acceded to a request made us by Dr. Leon L. Solomon, Secretary of the Section on Materia Medica, Pharmacy, and Therapeutics of the American Medical Association, relative to placing upon our list an assortment of Hypodermatic Tablets and Tablet Triturates containing Codeine Phosphate, Codeine Sulphate, and Codeine Alkaloid, *without sugar*.

We are now prepared to furnish the following:

H. T. No. 134, Codeine Phosphate, ⅛ grain (without sugar).

H. T. No. 135, Codeine Phosphate, ½ grain (without sugar).

For internal administration we can supply:

T. T. No. 733, Codeine Sulphate, ¼ grain (without sugar).

T. T. No. 734, Codeine Sulphate, 1 grain (without sugar).

T. T. No. 338, Codeine, ⅛ grain (without sugar).

T. T. No. 339, Codeine, 1-5 grain (without sugar).

T. T. No. 731, Codeine, ¼ grain (without sugar).

T. T. No. 46, Codeine, ½ grain (without sugar).

T. T. No. 732, Codeine, 1 grain (without sugar).

ICHTHYOL IN TUBERCULOSIS.

To meet the demand created by an article in the *New York Medical Journal* of April 2, 1898, by Dr. J. Edward Stubbert, physician in charge of the Loomis Sanitarium for Consumptives, at Liberty, N.Y., we have added to our list, and are now prepared to furnish, Enteric Pill No. 867, Ichthyol, 2 gr. This pill is used by Dr. Stubbert with considerable success in the treatment of tuberculosis.

Enteric pills are coated with substances specially designed to dissolve only in the alkaline media of the intestines. They are best administered therefore about an hour after eating, when the stomach secretions are acid. Enteric pills constitute an excellent method of administering nauseous substances or those whose action is not desired until they have passed through the stomach.

HOW TO ADMINISTER CASCARA SAGRADA.

Cascara, when properly employed, is an invaluable drug, in the opinion of Dr. Van Valzah, of New York City. It should be given in one dose so as to act at some particular, desired time. The Fluid Extract of Parke, Davis & Co. has given him the best satisfaction. The dose must be decided for each patient, and must be just enough to produce a formed, not a loose, stool. After ten days to two weeks the dose may be lessened by a drop or so every third night, not oftener, and thus the patient will gradually be brought to do without its assistance.—*Medical News.*

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THE TREATMENT OF TUBERCULOSIS WITH THE SYRUP OF IRON CHLORIDE.

BY GEO. W. WELD, M.D., NEW YORK.

Attention is specially directed (*Therapeutic Gazette*) to a case of anemia with phthisis, in which the treatment consisted in the administration of the Syrup of Iron Chloride in large quantities. The patient gained 7½ pounds in weight and 28 points in hemoglobin from April 29 to July 20, a period of eighty-two days.

The quantity of syrup the patient was taking when she paid her last visit was 2½ ounces three times a day, or 300 drops of the tincture of the chloride of iron of the U. S. Pharmacopœia. The preparation mentioned, viz., the Syrup of Iron Chloride, Parke, Davis & Co., is the old-fashioned tincture of the iron chloride slightly modified, each ounce of which contains forty drops of the tincture. It is easily borne by weak stomachs and can be taken in large quantities without deranging the digestive tract—a great advantage over many other preparations.

A DISTINCTION WITH A DIFFERENCE.

All Blaud's Tablets are not alike. The ordinary Blaud Mass (Ferrous carbonate) Tablets contain the ferrous carbonate ready formed. Blaud (Nascent) Tablets do not.

The latter differ from the ordinary tablets in containing a mechanical mixture of potassium bicarbonate and ferrous sulphate. These ingredients react upon each other in the presence of moisture, forming ferrous carbonate, which many believe is more freely absorbed in its nascent condition than it is after standing for some time exposed to more or less of oxidizing influences.

If one of these Nascent tablets be dropped in a glassful of water, chemical action begins at once, and in a short time a powdery mass will be formed which presently turns green, indicating the formation of ferrous carbonate.

SOME SUGGESTIONS IN THE TREATMENT OF TYPHOID FEVER.

At a meeting of the Muldraugh Hill Medical Society, held at Elizabethtown, Kentucky, December 8, 1898, Dr. D. W. Gaddie read a paper entitled "Some Suggestions in the Treatment of Typhoid Fever." In the course of the discussion of the paper Dr. A. G. Blincoe said he had used the Woodbridge Treatment in typhoid with good results. Dr. R. C. McCord said he thought the profession owed Dr. Woodbridge a debt of gratitude for inaugurating such a valuable plan of treatment for typhoid fever. He thought by the Woodbridge Treatment typhoid fever could be aborted. He had used it to a considerable extent; the results had been satisfactory in every respect.—*Louisville Journal of Surgery and Medicine.*

TREATMENT OF BUBOES.

A whole series of liquids have been recommended in the abortive treatment of buboes. Waelsch has sought to determine whether the principal factor in the reducing of the buboes is the injected medicament, or whether the injection alone of any liquid is sufficient to produce a therapeutic effect. For this purpose he selected sterilized physiological salt solutions. In 74 per cent of his cases a cure was effected by this method of treatment; the others required operation. It may therefore be stated that the treatment of buboes by the injection of physiological salt solution is to be considered as equally efficient with the usual methods of abortive treatment.—*Archiv für Dermatologie und Syphilis*, vol. xlii, No. 3.

In this connection we call attention to our Saline Solution, concentrated. This is a perfectly sterilized solution of chemically pure sodium chloride, potassium chloride, and calcium chloride, after the formula of Dr. F. S. Locke, of Harvard. The contents of each bottle is sufficient to make a liter of normal saline solution by diluting with sterilized water.

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SKIN DISEASES WHICH SUGGEST SECONDARY SYPHILIS.

There are sometimes found typical cases of skin lesions that do not respond readily to the remedial measures which are usually found to afford relief or cure in average cases of the particular type in question. No history of specific character can be elicited, but the very obstinacy of the symptoms, usually more tractable, leads to the suggestion of an alterative whose object aims at eradicating or eliminating that possible factor. No more satisfactory article for this purpose can be used than our Syrup Trifolium Compound. So many obstinate cases have been reported to us as cured in this way that we have much confidence in recommending it to the medical profession. It has been tested very thoroughly in the clinical practice of Rush Medical College of Chicago and other large clinical centers, with the best of results and the greatest satisfaction to both prescriber and patient.

A POWERFUL SEARCH-LIGHT THROWN ON THE URIC ACID DIATHESIS.

Alexander Haig, of London, has proved that there is retention of uric acid in rheumatism, and that the salicylates of the alkalies, such as sodium, potassium, and lithium, cause its elimination in soluble form.

A very efficient and meritorious combination of the Salicylates with Manaca is available in our Elixir Manaca and Salicylates. Manaca was originally introduced by Parke, Davis & Co. some years ago, and it has now come to be considered one of the most powerful alteratives in the materia medica. It has long enjoyed an unfailing reputation among the South American Indians as a specific for rheumatism and syphilis. The therapeutic properties of the salicylates being well understood, it will suffice to say that Elixir Manaca and Salicylates combines the virtues of Manaca with those of the Salicylates of Sodium, Potassium, and Lithium, thereby rendering it especially valuable in the treatment of gout and rheumatism. Each fluidounce represents:

Manaca, 80 grains.
Sodium Salicylate, 64 grains.
Potassium Salicylate, 32 grains.
Lithium Salicylate, 8 grains.

One teaspoonful, well diluted, and taken on an empty stomach, will yield prompt and gratifying results.

JAMBUL IN DIABETES MELLITUS.

Jambul is earnestly commended to the profession by Smyth (*American Practitioner and News*) as almost a specific in diabetes mellitus. When mixed with starch and diastase it arrests the production of dextrose. The author calls attention to the necessity of giving the drug a fair trial before reporting negatively upon it, of seeing that the preparation used is not made by the aid of heat or from old stock, of observing that some other disease is not present that interferes with results, and of being sure that the seeds are from the Java jambul. If these precautions are taken and the drug used in increasing doses, he assures his readers that "evidences of its beneficial effect will appear with a rapidity that is astonishing."

We prepare a fluid extract of the seed of *Eugenia Jambolana* which is in every respect worthy of clinical trial. We also supply the Powdered Jambul Seed. Literature will be furnished on application.

HOW TO ABORT A CASE OF MIGRAINE WITHOUT THE USE OF COAL-TAR PRODUCTS.

It is claimed that ten drops of fluid extract saw palmetto has aborted many cases of migraine. This is in all probability due to the fact that Saw Palmetto is an efficient diuretic, and thus favors the elimination of those excrementitious substances whose presence in the blood causes migraine. A very convenient way in which to administer Saw Palmetto is by means of our Soluble Elastic Capsules of Oleoresin Saw Palmetto, five minims, and Olive Oil, five minims.

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TWELVE HUNDRED CASES OF TYPHOID FEVER, WITH ONLY NINE DEATHS.

The scientific status of the Woodbridge treatment of typhoid fever may be inferred from the volumes of clinical reports which have been published in the medical press. In the limited space at our command it is unnecessary to enter into a detailed description of this successful procedure. It consists, briefly, in the systematic administration of intestinal antiseptics of known value.

In one of his papers, read before the American Medical Association, Dr. Woodbridge made the following forcible remark: "You have the 800 cases, with nine deaths, reported by 117 other physicians, some of whom have treated large numbers, as many as sixty cases, through severe epidemics, without a death, approximating my best results, and showing a grand total of 1200 cases of typhoid fever, taken at all stages of the disease, with only nine deaths, seven or eight of which were clearly due to grave complications, to the late stage of the disease at which treatment was begun, or to faults of preparation or administration of the remedies."

In the Various Forms of Pruritus.—Euthymol Cream, though a simple compound, is gaining an enviable reputation among physicians as an application for *pruritus*. This persistent symptom is the source of endless discomfort. We receive numerous letters from our friends who regard Euthymol Cream as the most satisfactory agent they have ever used to allay pruritus; in many instances, where applied merely as a soothing emollient, it has accomplished a cure. When we consider the composition of Euthymol Cream these results are not to be wondered at, as it contains lanolin and other oils, which are readily absorbed and serve as skin foods. At the same time they act as protective emollients, to say nothing of the very effective antiseptics present in the Cream.

ACTS LIKE A CHARM ON THE ASTHMATIC PAROXYSM.

Asthma is a most distressing and obstinate malady, and one that is hard to master. A very successful method of treatment consists in the hypodermatic administration of nitroglycerin, either alone or in combination with morphine and strychnine. If given at the time of the onset, the paroxysm may be checked at once.

A very excellent combination is our Hypodermatic Tablet No. 84, Nitroglycerin and Strychnine. Each tablet contains Glonoin (Nitroglycerin) $\frac{1}{100}$ grain, and Strychnine Nitrate, $\frac{1}{30}$ grain. To this may be added, at the discretion of the prescriber, a hypodermatic tablet of one of the many salts of morphine, formulæ of which may be found on our list.

CANNABIS INDICA IN EXCESSIVE MENSTRUATION.

While the curette is the ideal instrument for attacking menorrhagia, medical writers are constantly describing cases which will not permit operation. Then there are others in which the trouble is entirely one of functional derangement. In all such, especially when the exciting cause is an irritation arising in the Fallopian tubes or in the ovaries, two- to three-drop doses of a Standard Fluid Extract of Indian Cannabis, given every three or four hours, is often curative. It should be commenced a few hours after the flow sets in and continued until its effect is produced or the symptoms abate. Since the benefit received depends entirely upon the character and purity of the preparation used, physicians who specify Standard Fluid Extract Indian Cannabis, Parke, Davis & Co., will not be disappointed. We have established a pharmacological laboratory in which drugs of this class are tested on animals (both in the crude state and as finished products), and from which we send them out with our guarantee of medicinal activity.

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BAITING YE TRAVELING MAN.

BY WILLIAM A. JAMES, M.D., CHESTER, ILL.

I have quite a good deal of amusement with the representatives of the various compressed tablet manufacturers. They come into my office and expatiate upon the merits of their tablets. I let them alone until they are about exhausted, then I suggest that we try the solubility of them. I get two glasses of water, drop one of my tablets into one, and one of the same kind of theirs into the other. They watch my tablet go to pieces from one to five times quicker than theirs, then they ask whose make I use. I tell them Parke, Davis & Co.'s. They usually say, "My! How the time flies! I only have a few minutes to catch my train." The last one to call on me claimed that his tablets were very soluble. We tested different kinds and wound up with two-grain sugar-coated Quinine. Yours went to pieces in a few minutes. His was as hard as ever when he was ready to go. I asked him to call again when in my city. He said he would be around again in about three months, and he would call and see if his tablet had disintegrated.

The above is rather a long-winded story, but I thought it good enough to repeat.

EUFORMOL IN OFFENSIVE PERSPIRATION, CHAFING, AND ITCHING.

In cases of offensively smelling feet (Bromidrosis Pedum) it is a good plan to bathe the soles and the interdigital spaces once or twice a day with a 20-per-cent solution of our Euformol, and to have the inside of the boots, especially the soles, washed out with the same solution and carefully dried afterward. In a few days the offensive odor disappears. Applications of a weak solution of Euformol will prevent or even cure excoriations of the cuticle caused by chafing, while in the treatment of pruritus vulvæ and similar affections it may be used in more concentrated form.

GERMICIDAL SOAP.

DEPARTMENT OF HEALTH,
BUFFALO, N. Y., April 17, 1899.

BUREAU OF BACTERIOLOGY.

Parke, Davis & Co., Detroit, Mich.:

GENTLEMEN—I have the honor to state that after quite extensive experiments as to the bactericidal value of the "McClintock Germicidal Soap," it has been adopted for use in this laboratory.

It is found to be of special value following animal inoculation work.

Respectfully,
WILLIAM G. BISSELL, M.D.,
Bacteriologist.

A SIMPLE REMEDY FOR URTICARIA.

According to the *Denver Medical Times* Sodium Phosphate in one-drachm doses, after meals or oftener, is said to effect a cure of urticaria (hives or nettle-rash) within twenty-four hours, in 90 per cent of cases. Our Solution Sodium Phosphate Concentrated contains one drachm of the salt to each fluidounce of solution. It is pleasantly flavored, and being readily taken by children is quite available for administration to little patients in hot weather, when such eruptive disorders popularly known as hives, or prickly heat, are prevalent.

Purchasers of our tablets will appreciate an improvement in the manner of packing which we have recently adopted. Formerly it was customary to fill up the unoccupied space in each bottle with small wads of cotton batting. Since these were removed with difficulty, the opening of a fresh package caused considerable annoyance and inconvenience to physicians and pharmacists.

We are now using a superior cotton woven in coils, which is packed in the neck of the bottle in a single strip. When a fresh bottle is opened it is necessary only to catch the free end of the coil, when the entire packing may be drawn out in a single piece.

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THE NEW MATERIA MEDICA.

INDEX OF DISEASES AND REMEDIES—MERITORIOUS PREPARATIONS RECENTLY ADDED TO OUR LIST.

Since the appearance of the last issue of the NOTES we have added to our list a number of preparations which we trust will be found worthy of a favorable reception at the hands of our medical friends. While most of the formulæ submitted represent combinations of well known remedies, they are now presented in a new and attractive form. In point of convenience they are thus better suited to the needs of many busy practitioners who prefer considerable latitude in the choice of the mode in which their favorite formulæ shall be dispensed.

Chorea.

Fornaca (*Journal of the American Medical Association*) reports seven cases of chorea all rapidly cured with the Oil of Wintergreen (Methyl Salicylate). It equals in efficiency, and can be used instead of sodium salicylate. No more agreeable or effective mode of administration could be suggested than that afforded by our *Globules of Colchicine with Methyl Salicylate*, each containing $\frac{1}{250}$ grain of the alkaloid and three minims of Methyl Salicylate.

Chronic Cystitis and Gleet.

Our Globules Saw Palmetto and Santal Oils are extremely beneficial. Each globule contains the therapeutically active oils from one drachm of fresh ripe Saw Palmetto Fruit, combined with three minims pure Oil Santal. These Globules are used extensively in the treatment of gonorrhea.

Diabetes.

Powdered Jambul Seed has met with very marked success in the treatment of diabetes mellitus. Our *Chocolate-coated Tablet No. 188, Anti-Diabetic*, is an excellent combination of antidiabetic remedies of known reputation; its formula is:

Antipyrin, 2 grains.
F. E. Jambul Seed, 2 minims.
Codeine Sulphate, ½ grain.

We can also recommend our Tablets of Codeine without sugar; for further particulars concerning which the reader is kindly referred to page 28.

Epilepsy.

In epilepsy and in convulsive seizures of children we recommend *Elixir Bromide Compound*, P., D. & Co. Each fluidounce represents:

Chloral, 120 grains.
Potassium Bromide, 120 grains.
Extract Indian Cannabis, 1 grain.
Extract Hyoscyamus, 1 grain.

The Extract of Indian Cannabis is physiologically tested upon animals.

[Our Fluid Extract Horse-nettle Berries is recommended in epilepsy and tetanus.]

Gonorrhea.

Dr. Orville Horwitz highly recommends the following formula, which we have added to our list as *Soluble Elastic Capsule No. 162, Methylene Blue Compound* (*Dr. Orville Horwitz*):

Methylene blue, 1 grain.
Oil Santal Pure, 1½ minims.
Copaiba, 1½ minims.
Oil Cinnamon, ½ minim.
Dose: Two capsules three times daily.

[See Chronic Cystitis, etc.]

Headache.

Migraine, headache due to eye strain, or of nervous origin, is quickly relieved by the Bromides. Our *Compressed Tablet No. 331, Triple Bromides*, ℞ *2*, is conveniently taken by adults. Each tablet contains:

Sodium Bromide, 5 grains.
Potassium Bromide, 5 grains.
Ammonium Bromide, 5 grains.

We have for some time listed *Compressed Tablet No. 49, Triple Bromides*, each containing but 2½ grains of each of the three salts named.

Compressed Tablet No. 338, Potassium

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Bromide, ten grains, has been added to our list to supply an evident demand. Our line of preparations containing the Bromides in a variety of forms is now quite complete

Indigestion.

Our *Chocolate-coated Tablet No. 187, Pepsin and Salol Compound*, will find ready application in the hands of many experienced therapists. It contains:

Pepsin Aseptic (1:3000), 1 grain.
Bismuth Subgallate, 2½ grains.
Salol, ½ grain.
Extract Nux Vomica, ⅛ grain.

Malarial Affections.

"I have found, during the last ten years, the *Fluid Extract of Five-flowered Gentian*, of Parke, Davis & Co., Detroit, Mich., to be an excellent remedy in malarial affections, especially of low grade, with loaded tongue and congested liver," writes H. D. Rinehart, M.D., Covington, Ohio, in the *Medical Summary* for December, 1898.

Typhoid.

In the tympanites of typhoid and in the flatulence of old people *Chocolate-coated Tablet No. 183, Asafetida 3 grains*, will prove of use.

[A mere mention of the Woodbridge Treatment is sufficient to recall its popularity. Send for special Woodbridge Literature.]

Valvular Disease of the Heart.

Chocolate-coated Tablet No. 192, Digitalis, Strophanthus, and Strychnine, is a very desirable combination. It contains the true heart tonic, Tincture of Digitalis, instead of the ofttimes uncertain Digitalin. Each tablet represents:

Tincture Digitalis, 3 minims.
Tincture Strophanthus, 2 minims.
Strychnine Nitrate, 1-100 grain.

FROM THE OFFICIAL HEALTH REPORTS OF DENVER AND MILWAUKEE.

DIPHTHERIA MORTALITY IN DENVER.

1897.	Cases.	Deaths.	Mortality per cent.
Total number of cases	297	43	14.5
Treated *with* Antitoxin (P., D. & Co.)	147	6	4.1
Treated *without* Antitoxin	150	37	24.6
1898.			
Total number of cases	386	34	8.81
Treated *with* Antitoxin (P., D. & Co.)	230	8	3.8
Treated *without* Antitoxin	156	26	16.66

Of forty-six cases reported as treated with our Antidiphtheritic Serum in Milwaukee, but one died, a mortality of only 2.17 per cent.

THE STINGS OF BEES AND THE BITES OF MOSQUITOES EASILY ASSUAGED BY EUFORMOL.

Our Formaldehyde, 40-per-cent Solution, is an excellent remedy for the irritation produced by the stings of all insects. The "bite" is touched with the moistened stopper of the Formaldehyde bottle, and as soon as the application begins to smart the excess of solution is wiped off. Relief is almost instantaneous.

For persons with delicate skin, as ladies and children, our Euformol, which contains 5-per-cent formaldehyde, affords a pleasant and efficient lotion for the treatment of mosquito bites and bee stings. It should be applied in the same manner—that is, a single drop should be placed upon each "bite," and allowed to remain until smarting indicates its effect.

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

EDITORIAL.

APROPOS OF THE COLUMBUS MEETING.

A Hearty Invitation to All Medical Practitioners Who Will Attend the Next Gathering of the American Medical Association.

A large attendance is confidently expected for the Columbus meeting, which takes place early in June, and we doubt not that a considerable number of medical practitioners will pass through Detroit or come within hailing distance of our beautiful city on their way to or from the Convention. We earnestly hope that they will all favor us with a visit on the strength of our assurance that they will be most welcome; that every department of our Pharmaceutical and Biological Laboratories will be open to their inspection; and that we shall gladly give them every facility for studying the production of any remedy bearing our label.

We have yet to meet the educated physician who did not consider himself handsomely repaid for the time spent in a visit to our Laboratories.

Come and see the scale on which we produce, and the methods, chemical and physiological, by which we test remedial agents in the largest manufacturing pharmacy that the world has ever seen.

Our representatives at Columbus will gladly give any desired information respecting railway fares, trains, connections with steamer at Toledo or Cleveland, etc.

THE BESOM OF SCIENCE HAS SWEPT AWAY THE OLD-TIME MISERY.

On a recent occasion the faculty and students of the Medico-Chirurgical College visited our Branch House in Kansas City, Mo. In the course of a very interesting and instructive address to the students, Dr. E. R. Lewis, Professor of Surgery and Clinical Surgery, said:

"I have practiced medicine for a quarter of a century, and in my younger days the bacteriological products, now so successfully used, were unheard of.

"Ah, if you had lived and practiced medicine twenty-five years ago; if you had gone away from the bedside of some little child, leaving it in the last agonies of that dread disease, diphtheria; if you could have seen the heart-broken mother, the distressed father and family, and have had your heart ache to bursting at the sad knowledge that you had done everything in your power and were not able to save their treasure—that you could but sign a death certificate in compliance with the requirements of the law—if, I say, you had gone through such experiences as these, and then in a glorious light of scientific research Antitoxin had been placed in your hands, you would be fully able to appreciate the service that Parke, Davis & Co. have done their fellow men as producers of the great remedy.

"When at last you graduate and go out from your Alma Mater to do your best for the people who are confided to your hands for treatment, in all your practice bear in mind the value of pure, good pharmaceuticals, the deserts of ambitious, scientific, honest, straightforward manufacturers, and let your watchword to your druggist be—'Parke, Davis & Co.'"

FOR THE CONSTIPATION OF THE PUERPERIUM.

Dr. Denslow Lewis, Professor of Gynecology in the Chicago Polyclinic, has made a success in a practice extending over a score of years, and his recommendation (*Kansas City Medical Record*) de-

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rives therefrom a status of authority. In the contest with the constipation of the whole puerperium he makes the campaign with Cascara Sagrada. The Cascara is the beginning and the base of the treatment; nothing is allowed to replace its regular daily exhibition, and it is never omitted. The only change is a diminution of the dose whenever certain characteristic manifestations of its power make their appearance. Dr. Lewis has been able to develop this constant scheme of treatment largely because he has always used Parke, Davis & Co.'s preparation, which is always the same in uniform potency, and yields unvarying results.

PEPSIN ACTS IN ACID MEDIA.

It is not by any means an unusual thing to learn of prescriptions incorporating pepsin with an alkaline substance such as sodium bicarbonate. If such a prescription does good it is because the soda gives the ptyalin a longer time to act upon the starches, and the probability is that the diagnosis is wrong in considering there was insufficiency of proteid digestion. Pepsin does not exert its full efficiency unless exhibited in acid solutions; sodium bicarbonate prevents its action.

ACCOUNTS FOR A GOOD DEAL OF MEDICAL UNBELIEF.

There is much significance in the statement made to us by Dr. E. A. Crain, Great Falls, Montana, who informs us that he never uses ergot, on account of the pain and the danger of abscesses. "The patients who require ergot are usually in a poor, nervous condition, and their outcries, produced by its administration, frighten their friends." Dr. Crain need not feel at all lonesome. There are scores and hundreds of level-headed practitioners who will not use ergot for the very reasons that he sets forth, viz., the pain and the danger of abscesses. The chance afforded the physician by our Ergot Aseptic accounts for the rapidity with which this product has made its way in the professional favor.

INCESSANT VOMITING OF PREGNANCY CHECKED BY TAKA-DIASTASE.

A physician in New Rochelle, New York, has very recently experienced the efficacy of Taka-Diastase in ameliorating the persistent vomiting which is not an uncommon concomitant of pregnancy. The patient was unable to retain any food, vomiting being almost incessant. He had, as he supposed, exhausted his resources in the form of medicinal agents, having tried cocaine, cerium oxalate, and other available remedies. The patient's condition became so ominous that the physician contemplated the induction of premature labor as the only hope of escaping a greater evil. As a last resort Taka-Diastase was administered in three-grain doses, combined with a small proportion of cocaine. On the first day of the new treatment the patient felt somewhat better, and on the second day opened the door when the Doctor made his call. The patient is now able to partake of food without any unpleasant after-effects.

The foregoing is by no means an isolated case. We have received and published a number of similar reports, but we have refrained from laying stress on the efficacy of Taka-Diastase in mitigating the vomiting of pregnancy until the volume of clinical testimony should be such as to remove all doubt. We should be pleased to receive further reports, favorable or unfavorable, from the readers of the NOTES who have tested Taka-Diastase under similar conditions.

CINCHONA ALKALOIDS VS. BARK, IN MALARIA.

Dr. Beverley Robinson, of New York, speaking on the subject of malaria at the annual meeting of the American Climatological Association (Bethlehem, N. H., Sept. 1, 1898), said that "we are disposed to believe a little too much in using our cinchona alkaloids, because they are useful and are so easily administered. The bark itself is of very great benefit. I think there is a rational basis of belief

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that the bark itself will be of use in removing the poison of malaria. The bark must be given in many of these instances if one wishes to secure the best effects. I would refer to one preparation by a firm in the West, Parke, Davis & Co.'s Compound Fluid Cinchona, which is nothing more than the compound tincture of cinchona with four times its strength, so that if one gives five or ten minims of the compound fluid cinchona he is giving four times the strength of the tincture. I have found it a very useful way of giving the bark and have obtained very good effects from it."—*Medical News.*

AN EXPRESSION OF TRUST.

The professional eminence of Dr. Jas. E. Stubbs, President of the Faculty and Professor of Practice of Medicine at Harvey Medical College, Chicago, makes the following instance of spontaneous praise the more valuable. He says, recommending one of our diastase preparations in a clinical lecture: "You will find by the time you have been in practice five or ten years or less that anything Parke, Davis & Co. make is all right, and that anything that Parke, Davis & Co. tell you is the truth. Pin your faith to Parke, Davis & Co."

It has always been our aim to merit the fullest confidence of the medical profession by making each and every one of our products "on honor" with our reputation behind it. Expressions come to us by every mail proving that we hold the confidence we have sought, and these are highly appreciated.

PODALIC VERSION UNDER DIFFICULTIES.

Dr. Edward D. Newell, of King, La., in the *New Orleans Medical and Surgical Journal* for February, 1899, reports two cases of podalic version under difficult circumstances. Both were colored women, surrounded by conditions far removed from the aseptic ideal. In each case the labor had lasted for many hours and uterine contractions had entirely ceased.

After much difficulty delivery was finally accomplished, and, to quote the author's own words, "in both these cases, immediately after expulsion of placenta, I injected Ergot Aseptic (P., D. & Co.). The effect was prompt and complete; no hemorrhage in either case and no pain or abscess followed the injection." Considering the unclean condition of these patients, and their filthy surroundings, this was indeed a very gratifying result.

THE KIND OF RECORD OUR ASEPTIC VACCINE IS MAKING.

80 Vaccinations—78 Successes

are reported by Dr. William Daniel, Health Officer of Harrison County, Indiana. He says: "I have recommended the exclusive use of Aseptic Vaccine (P., D. & Co.) in my county."

In "Black and White."

Dr. W. L. Hughlett, of Cocoa, Florida, says: "I have used several hundred of your vaccine tubes in both black and white subjects, without a single serious result."

An Extraordinary Showing.

Dr. W. D. Sharpe, of Lyn, Ontario, says: "I have used 500 of your vaccine tubes without one failure in primary vaccination."

"I Shall Always Employ Your Virus

whenever I find it necessary to use vaccine," is the unsolicited statement of Dr. J. F. Cogan, of Dawson, Pa. "The results obtained are highly favorable."

"The Lymph from Your Laboratories

was so universally satisfactory as to prompt me to acquaint you with the particulars," writes Dr. Leon L. Solomon, Kentucky University, Louisville. His results with Aseptic Vaccine (P., D. & Co.) are shown in the table.

	Vaccinations.	Successful.	Failures.
Secondary	91	87	4
Primary	35	34	1
Totals	126	121	5

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"I Wish to Congratulate You

upon the absence of septic material," writes Dr. James T. Blackburn, of Louisville, Ky. "I have used over fifty of your Aseptic Vaccine tubes this winter with the most gratifying results."

"What or Who Can Show Better Results?"

Such is the query of Dr. M. W. O'Brien, of Alexandria, Va., surgeon for the Southern Railroad. "Out of 860 vaccinations I think I have had but two failures in original vaccinations, and in all just twenty-six."

"I Am Pleased

to say that I have recently used more than thirty of P., D. & Co.'s Vaccine tubes, not only with entire success, but without an untoward event," writes C. M. Fenn, A.M., M.D., of San Diego, Cal.

Eight Hundred Indians Vaccinated.

I have used during the last two months for the Indians of this Agency eight hundred tubes of your Aseptic Vaccine. I had better success with them than with any other vaccine used during my eight years in the service.

All of the eight hundred vaccinations made with your vaccine have "taken" nicely. In each case there was a nice, healthy vaccinia scab, without any cutaneous trouble.

JULIUS SILBERSTEIN, M.A., M.D.,
Surgeon U. S. Indian Service,
Pima Agency, Arizona.

INSTANTANEOUS DISINTEGRATION OF COMPRESSED TABLETS.

For therapeutic purposes it is not alone sufficient that the compressed tablet look well or that its formula be theoretically perfect; it must be mechanically perfect —that is, it must be capable of ready disintegration. We invite practical test of our tablets of such sparingly soluble substances as Acetanilid, Sulphur, Quinine Sulphate, etc. Drop one or two into a glassful of water and note the rapidity with which they disintegrate. It follows, of course, that a tablet which does so in water will do so in the stomach. The physician will not have occasion to complain of our compressed tablets that they pass through the alimentary canal undissolved.

SKILFULLY AND HONESTLY MADE.

The Elegance of Our Elixirs Involves no Sin of Omission.

Our very complete line of Medicinal Elixirs includes no less than 125 preparations, representing many valuable and useful formulæ. While our Elixirs are attractive in appearance and pleasant to the palate, their elegance is not attained by omitting bitter though active and therefore essential principles. We recognize the fact that medicines are prescribed for their therapeutic effect, and not for their pleasing qualities of appearance or taste. While skilfully made, our Elixirs are absolutely reliable and honest in conformity to the labels which they bear.

ANTISTREPTOCOCCIC SERUM IN EPIDEMIC CEREBROSPINAL MENINGITIS.

In view of the prevalence of Spotted Fever in various localities throughout the United States, it is interesting to note that a successful trial of Antistreptococcic Serum in the treatment of that disease has been reported. Dr. C. P. McNabb, of Knoxville, Tenn., saw such a case January 21, 1899. After the usual forms of medication had been tried and the patient's condition had become serious, 2½ drachms of serum was injected into the subcutaneous areolar tissue of the abdomen. A second injection was given the next day. The patient improved, and eventually made a satisfactory recovery.

Our Antistreptococcic Serum is being used with success in the treatment of puerperal septicemia and other grave conditions dependent upon streptococcic infection.

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CLINICAL REPORTS.

Fucus Vesiculosus in Obesity.

M. Duchesne-Duparc is said to have been the first to recommend Bladder-wrack as a remedy for obesity. Much farinaceous food, beer, prolonged baths, and sedentary habits should be avoided. Dr. Griffith, author of "Corpulence, or How to Get Lean," says: "In the course of a few weeks my burdensome form grew 'small by degrees and beautifully less,' much to my satisfaction. . . . I administered the Bladder-wrack to three of my corpulent neighbors with the following results. In neither of the cases was it administered with any regard to regularity. In one case the loss was from 12 to 15 pounds in about two months; in another the diminution in weight was 30 pounds in three months; in the third case there was decided relief from the discomfort under which the patient labored."

Messrs. Parke, Davis & Co. write that they sell large quantities of the Fucus Vesiculosus and receive favorable accounts from those who use it. They will be glad to reply to any communication made to them, either personally or by letter, and will send a small brochure on the seaweed in question.—*New York Lancet*, January, 1899.

Effective in Genito-urinary Disorders.

We have used a quantity of your Elixir Saw Palmetto and Santal Compound in the Genito-urinary Department of the St. James Dispensary, and find it an excellent and efficient remedy in cystitis from any cause, also very effective in all genito-urinary disorders.—ST. JAMES DISPENSARY, Savannah, Ga. A. B. Simmons, M.D., President; John W. Daniel, M.D., Secretary.

I have given Elixir Saw Palmetto and Santal Compound, P., D. & Co., to a patient troubled with cystitis of two years' standing and an irritable prostate. He has used most of the bottle and is so greatly improved that I predict full recovery. Noticeable improvement was observed in five days. With the occurrence of painful micturition I added Tincture Opium and Tincture Belladonna.—J. B. WILSON, M.D., 206 E. 4th St., Cincinnati, O.

Marked Improvement While Taking Our Solution Iron and Manganese (Aromatic).

I have given six ounces of Solution Iron and Manganese Aromatic, P., D. & Co., to one of my patients, a lady 25 years old; one child four years; sterility from cervical laceration and catarrh with great emaciation. Flesh reduced from 145 pounds to 95 pounds when she began the use of the Iron and Manganese. Two weeks later the patient had gained twelve pounds. I then gave her a prescription of four ounces of Iron and Manganese. Since beginning the use of the prescription she has improved wonderfully.—E. S. PEACOCK, M.D., Harrison, Ga.

"Should Lay Aside Preconceived Prejudices."

The result of the Woodbridge Treatment in typhoid fever in my practice has been the most gratifying success in every case that I have ever had, not a single death occurring amongst my cases of typhoid fever since I began the Woodbridge Treatment. I use it likewise in several other types of fever. It is high time, for the sake of suffering humanity, that members of the profession lay aside their preconceived prejudices and at least give the Woodbridge Treatment a fair and unbiased trial.—DR. W. K. GRAYSON, Ratler, Mills Co., Texas.

A Very Valuable but an Uncertain Drug.

Cannabis Indica, although a very valuable drug, is sometimes uncertain in its action on different persons and at different times, even where the same preparation is used. It is therefore important that the practitioner should have a reliable preparation, so that he may be sure that peculiarities of action are due, not to

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defect in the drug, but to the idiosyncrasies of the patient.

Parke, Davis & Co.'s Fluid Extract Cannabis Indica I have found to be a reliable preparation.—A. F. McKENZIE, M.D., Monkton, Ont., March 15, 1899.

Twenty-five Cases of Undoubted Diphtheria.

In twenty-five cases of undoubted diphtheria I have had 100 per cent recoveries. Better results cannot be obtained. There were no unpleasant side effects. In six instances ——'s German serum gave untoward effects, and since that time I have always taken care not to have anything to do with it. Hope that unreasonable patent laws will not expose suffering humanity to enterprising firms who will foist an inferior article upon us.—A. G. SANDBLAD, M.D., 1019 Jenny Lind Street, McKeesport, Pa.

An Aid in Treating Throat Diseases.

I use large quantities of liquid antiseptics, etc., but I find Euthymol superior to any on the market for throat and nasal spray, as it is non-irritating. Of late I have been advising patients to use Euthymol Tooth Paste. In many cases it greatly aids in treating diseases of the throat by removing the irritating and disease-producing impurities that accumulate on the teeth.—L. R. McCREADY, M.D., Medical Director of the International Health Association, Grand Rapids, Mich.

Epilepsy Treated with Horse-nettle.

A recent article in the *Medical Age*, by Dr. C. B. Stockwell, claims that excellent results were secured by the use of Parke, Davis & Co.'s fluid extract of horse-nettle root in the treatment of a case of epilepsy. He tried the fluid extract of the berries, but prefers that made from the root.

Not the Ordinary Beef Extract.

Since my first use of Mosquera's Beef Jelly I have discarded all beef extracts and would accept nothing else in its place. Mosquera's Beef Jelly is so much more palatable and the results obtained from it are vastly more satisfactory. I have had both our druggists order it, so that we shall not be without it again, as we were a couple of months ago.—J. ALLAN CROSS, M.D., C.M., Sand Beach, Mich.

Good Results Follow Our Ergot.

I have just had such a good result with the use of your Fluid Extract Ergot in an unusually troublesome miscarriage that I wish to report it. I had first used some of another make, and having waited twenty-four hours, secured some of your manufacture. The first dose of a half-drachm produced the desired result, much to my satisfaction.—E. T. DUKE, M.D., Cumberland, Md.

I Have Used Over 700 Tubes

of your Aseptic Vaccine, with *perfect success*. I have not had a single case of sloughing since I began the use of your vaccine, and my State convicts have not lost one hour's work from being vaccinated. I am glad to say I can tell my patients that they need not fear a bad sloughing sore when vaccinated with Parke, Davis & Co.'s Vaccine. No one can induce me to use any other than P., D. & Co.'s.—BASCOM LYNN, M.D., Weldon, Texas.

I am so well pleased with the results obtained from Euthymol as a mouth-wash and gargle that I recommend it to all my patients.—CHARLES L. REICH, Dentist, 1705 Polk Street, San Francisco, Cal., April 3, 1899.

"The Best Chance" in Tetanus.—Dr. Matthew M. Smith, reporting to the *Texas Medical News* a case of tetanus successfully treated with Parke, Davis & Co.'s Antitetanic Serum, remarks: (1) That the serum treatment offers the best chance for life in cases of tetanus, other remedies being conjointly used as indicated; (2) that it should be used early and repeated when necessary; (3) that the serum should be of the best quality and administered with antiseptic precautions.

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Physiologically and Bacteriologically Tested.

(Glycerinated)

We guard every step with uncompromising scrutiny, and assure the Purity of the Product by the most rigid antiseptic and aseptic measures.

Applying the Vaccine to patient's arm directly from the tube.

Our Aseptic Vaccine is put up in sealed glass capillary tubes, each holding sufficient for one vaccination, in cases of ten tubes, with small rubber bulb to expel the contents.

Price, $1.00 per Case.

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ANTIDIPHTHERITIC SERUM,
For Diphtheria.

ANTISTREPTOCOCCIC SERUM,
For Puerperal Fever, Erysipelas, Scarlatina, etc.

ANTITETANIC SERUM,
For Tetanus (Lockjaw).

ANTITUBERCLE SERUM,
For Tuberculosis.

COLEY'S MIXTURE,
For the treatment of inoperable Tumors (Sarcoma).

CULTURE MEDIA,
For use in bacteriological work.

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For microscopic diagnosis. Mounted in balsam.

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For incipient Tuberculosis, etc.

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ERGOT, CANNABIS INDICA, HYOSCYAMUS, DIGITALIS, STROPHANTHUS,

and other toxic and narcotic drugs. If you want a ***reliable*** fluid extract of these drugs that is submitted to a careful physiological test before it leaves the laboratory, specify P., D. & Co., and you will get it.

One Reason Why You Should Specify P., D. & Co.

Over 30,000 pounds of Cannabis Indica and 20,000 pounds of Ergot were rejected by us during the past twelve months—condemned by our Pharmacological Laboratory on the cogent ground of defective activity, or complete inertness.

Rejected By Us, What Becomes of Them?

The only possible means of trustworthy assay of many powerful drugs is a physiological test, and we make it in our Pharmacological Laboratory.

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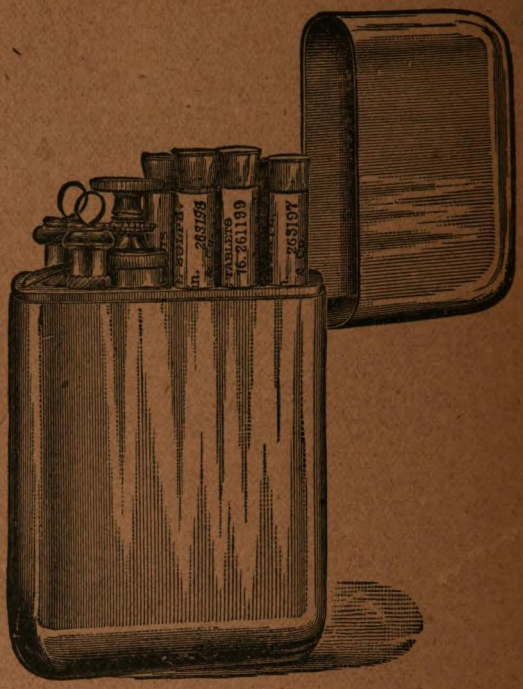

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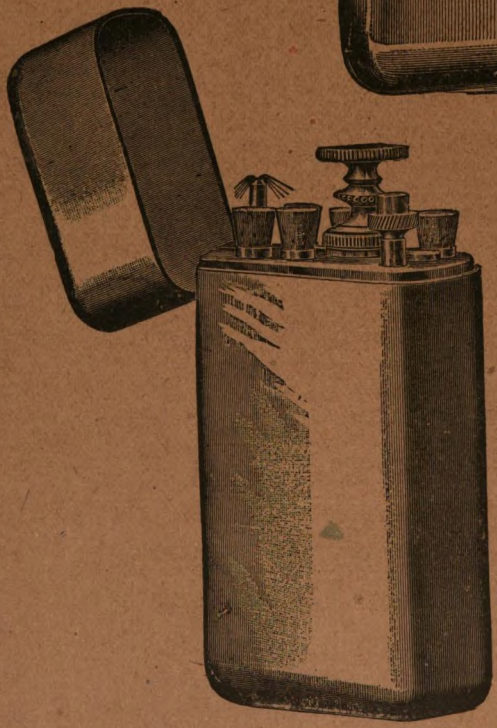

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The Cases are made of Aluminum, and contain an Improved Hypodermatic Syringe, with special and attractive features, aseptic needles, extra supply of wires for cleaning purposes, and assortment of Hypodermatic Tablets.

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Therapeutic Notes

PUBLISHED BY PARKE, DAVIS & CO.,
DETROIT, MICH.

No. 3. Sixth Year. September, 1899

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Fluid Extract Cascara Sagrada

WE INTRODUCED IT TO THE MEDICAL PROFESSION MORE THAN TWENTY YEARS AGO.

It has stood the test of time, and to-day it occupies a place in the pharmacopœias of the United States, Great Britain, Austria, Denmark, Russia, and Switzerland, also in the supplement to the French Codex; and is everywhere recognized as being THE remedy of remedies for constipation and intestinal torpor. Our Fluid Extract Cascara Sagrada, unlike the product of many manufacturers, acts with unusual certainty and without causing irritation or any other unpleasant symptom. Its special and distinctive virtue lies in the fact that it overcomes habitual constipation, and exerts a permanent influence upon the intestinal tract. Hundreds of physicians have given testimony that Fluid Extract Cascara Sagrada, P., D. & Co., produces a tonic laxative and curative effect not obtainable from the use of any other make.

Specify P., D. & Co., and get the kind that always gives satisfaction.

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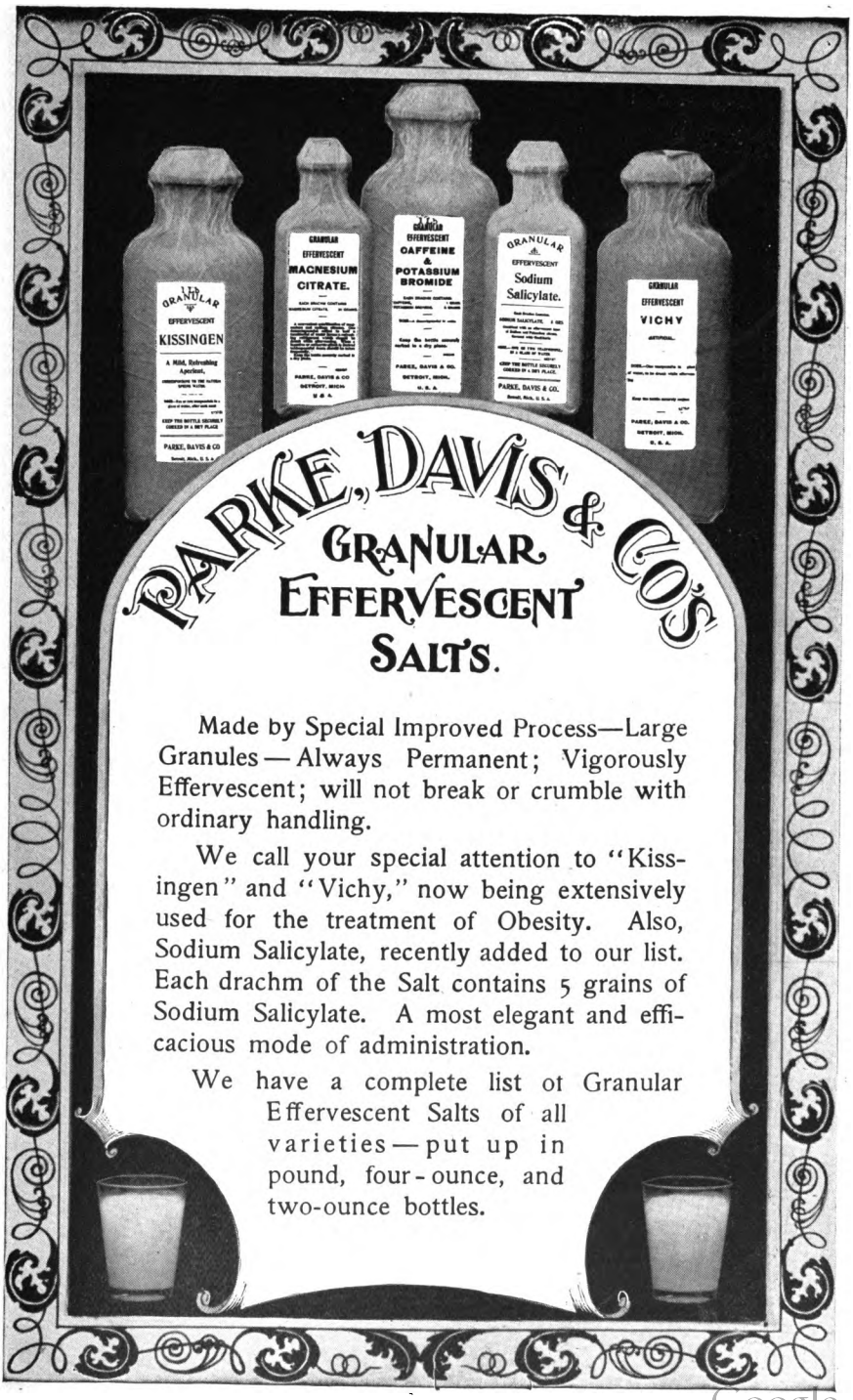

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We call your special attention to "Kissingen" and "Vichy," now being extensively used for the treatment of Obesity. Also, Sodium Salicylate, recently added to our list. Each drachm of the Salt contains 5 grains of Sodium Salicylate. A most elegant and efficacious mode of administration.

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A combination in convenient form, having a decided advantage over the Salicylates. It is not liable to contamination with impurities which are found in the artificial Salicylic Acid. It will most markedly relieve the pain of Gout. Each globule contains Colchicine 1-250 gr.; Methyl Salicylate 3 minims.

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Therapeutic Notes

SIXTH YEAR. DETROIT, MICH., SEPTEMBER, 1899. No. 3.

THERAPEUTICS.

AN IMPROVED METHOD OF VACCINATION.

BY EDWARD SPEIDEL, M.D.,

Lecturer on Obstetrics, Clinical Lecturer on Gynecology, Hospital College of Medicine, Louisville, Ky.

When vaccine virus is inserted under the skin, under ideal conditions, the result should be a vesicle whose contents become purulent in eight to ten days, followed by umbilication and desiccation with the formation of the scab and final cicatrix. With the aseptic vaccine of Parke, Davis & Co. an ideal result is attainable in the majority of vaccinations.

The *modus operandi* consists in washing a space on the arm thoroughly with soap and water, rinsing with clean water, and drying with a fresh, clean towel. No alcohol, ether, or other antiseptics should be used, as they may destroy the vaccine virus.

The operator washes his hands, cleans his stylet, and denudes a small area on the cleansed skin; applies the glycerinated virus, *and promotes absorption by rubbing it into the denuded tissue with his instrument.* The adhesive surface of a thick bunion plaster is moistened with water and the plaster placed so that the vaccination fits into the hole in the plaster. A strip of rubber adhesive plaster long enough to encircle the arm is then taken; upon the middle of the adhesive side is pressed a piece a square inch in size of cleansed rubber tissue, dull side downward. The strip of adhesive is then placed around the arm, the part carrying the little square rubber tissue fitting over the hole in the bunion plaster. The strip of rubber tissue prevents the adhesive surface of the rubber plaster from coming in contact with the vaccination, as occurred in several instances before this precaution was taken. In this way the vaccination is protected from contamination, injury, and the friction of the clothing, and generally proceeds undisturbed to the end.—*Louisville Journal of Surgery and Medicine*, May, 1899.

SIXTY-NINE CASES OF SERUM-TREATED DIPHTHERIA.

BY M. A. ALBL, M.D., CLEVELAND, O.

In considering the quantity of antitoxin to be given the depth of the poisoning of the system by the toxins must be taken into consideration. Experience has taught me that a child one year old can stand as much antitoxin as a child of ten and not show the effects as much as the latter. My experience consists of sixty-nine cases of diphtheria in which antitoxin was used, with sixty-two recoveries. In injecting the Antitoxin all antiseptic precautions were taken. In no case was there any suppuration at the point of injection. The disease was controlled within twenty-four hours.

In my experience the Antitoxin made by Parke, Davis & Co. is superior to any other.—*Cleveland Medical Gazette*, June, 1899.

I am glad to say that Dr. Henry M. Lyman, Senior Professor of Practice of Medicine, Rush Medical College, called my attention to Chlor-Anodyne in a consultation some fifteen to twenty years ago. I have used it and advised its use very many times since, always with the "P., D. & Co."—ADDISON H. FOSTER, M.D., Chicago.

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THE NEW MATERIA MEDICA.

INDEX OF DISEASES AND REMEDIES—MERITORIOUS PREPARATIONS RECENTLY ADDED TO OUR LIST.

Anemia and Chlorosis, with Constipation.

For this quite common condition no better formula could be devised than our *Chocolate-coated Tablet No. 194, Blaud Tonic Laxative*, each containing:

Ferrous Carbonate Mass (Blaud), 3 grains.
Quinine Sulphate, ½ grain.
Extract Nux Vomica, 1-10 grain.
Aloin, ⅛ grain.

The value of iron in anemic conditions is thoroughly established, but the fact is recognized that it is quite likely to produce constipation.

The addition of Aloin to this tablet obviates any difficulty in that direction. In conjunction with the valuable tonics, Quinine Sulphate and Nux Vomica, it forms a combination of more than ordinary utility in cases in which remedies of this class are indicated.

For the benefit of those physicians who prefer Cascara Sagrada to any other laxative, we have deemed it advisable to add to our list *Chocolate-coated Tablet No. 195, Blaud with Nux Vomica and Cascara*. Each tablet contains:

Ferrous Carbonate Mass (Blaud), 3 grains.
Extract Nux Vomica, 1-10 grain.
Extract Cascara Sagrada, 1 grain.

The combination of Nux Vomica with Cascara not only relieves the constipation for the time being, but being tonic to the muscular coat of the intestine its persistent use will accomplish a thorough cure in most cases of chronic constipation.

Asthenia.

For the successful administration of Strychnine we recommend a trial of our *Chocolate-coated Tablet No. 206, Strychnine Sulphate, 1-120 grain*. The Chocolate investment effectually covers the intensely bitter taste of the drug, so that this tablet will be readily taken by children.

We also list now a *Tablet Triturate No. 739, Strychnine Sulphate, 1-120 grain*. Our list includes tablets of Strychnine Sulphate ranging in dose from 1-1000 to 1-16 grain, which affords sufficient variety to suit the most exacting condition.

We call attention to a recent acquisition in the form of *Pill No. 872, Strychnine Phosphate, 1-100 grain* (Gelatin-coated only).

Bronchitis, Laryngitis, etc.

We are now prepared to furnish *Chocolate-coated Tablet No. 197, Cold* (Laxative), each of which contains:

Quinine Hydrobromate, 2 grains.
Ipecac and Opium Powder, 2½ grains.
Aloin, ⅛ grain.
Mercurous Chloride, mild, ⅛ grain.
Powdered Capsicum, ½ grain.
Tincture Aconite, ½ minim.

This tablet will be found very serviceable in breaking up the first stage of severe colds, which are often attended with a torpid condition of the bowels.

Bronchitis (Chronic).

We suggest a trial of our *Chocolate-coated Tablet No. 203, Terpin Hydrate and Codeine*, each of which contains:

Terpin Hydrate, 2 grains.
Codeine Sulphate, ⅛ grain.

Under certain conditions a fluid preparation, like our Elixir Terpin Hydrate and Codeine, may be preferred, but on many occasions a tablet will be more readily taken. We have given careful consideration to the proportion of medicaments in this formula, so that it is now possible for the physician to increase the dose of codeine by administering two of our tablets without unduly increasing the dose of Terpin Hydrate.

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Catarrh (Gastro-duodenal).

Compressed Tablet No. 340, Calomel and Sodium Bicarbonate, ℞ 3, represents an old favorite in slightly modified form. Each tablet contains:

Mercurous Chloride, mild, ½ grain.
Sodium Bicarbonate, 3 grains.

Reputable practitioners have asserted that the majority of tablets of Calomel and Sodium Bicarbonate contain an insufficient quantity of the latter. It is to meet an apparent demand, therefore, that we have placed this larger tablet on our list.

Catarrh (Intestinal).

[See Dyspepsia.]

A very excellent formula is that of our *Chocolate-coated Tablet No. 208, Bismuth Subgallate Compound No. 2.* Each tablet contains:

Bismuth Subgallate, 3 grains.
Pure Pancreatin, 2 grains.
Extract Nux Vomica, ¼ grain.

Colds.

In ordinary colds and other mild inflammatory disorders, a gentle diaphoretic effect may be produced by the administration of *Chocolate-coated Tablet No. 201, Tully Powder, 5-grain.* The indications for the use of Tully's powder may be said to be, in general, the same as those for the use of Dover's powder.

Colic (Infantile).

We have recently added to our tablet list *Tablet Triturate No. 740, Anodyne Infant* (Dr. Waugh), each of which contains:

Nickel Bromide, 1-134 grain.
Codeine Sulphate, 1-67 grain.
Powdered Ipecac, 1-134 grain.
Lithium Carbonate, 1-25 grain.
Oil Anise, 1-134 minim.

Constipation.

[See Anemia.]

It is scarcely necessary for us to expatiate upon the merits of our Cascara Sagrada. It is unquestionably the ideal remedy for chronic constipation. The chief points to bear in mind are: First, it is a *tonic laxative*, not a drastic cathartic; secondly, its use must be prolonged until a cure has been effected.

The bitter tonic principle of the drug can be eliminated, but it is so essential to activity that it should not be sacrificed. An available mode of administration in which the bitter taste is obscured is by means of our *Compressed Tablet No. 261 (Sugar-coated), Cascara Sagrada Extract, 2 grains.*

Still another interesting addition to our list of remedies for constipation is our *Chocolate-coated Tablet No. 209, Evacuant.* Each tablet contains:

Aloin, 1-4 grain.
Strychnine, 1-60 grain.
Extract Belladonna leaves, 1-8 grain.
Powdered Ipecac, 1-16 grain.

Coryza.

[See Bronchitis.]

One of the following tablets may be given every hour, possibly supplemented with tonic doses of Quinine. For a severe cold adults may take ten tablets on retiring. This formula has been recently added to our list as *Chocolate-coated Tablet No. 204, Cold No. 4* (Dr. H. L. Coit). Each contains:

Aconite, 1-10 grain.
Camphor, 1-10 grain.
Powdered Opium, 1-10 grain.
Potassium Nitrate, 1-10 grain.

This is an available remedy for frequent administration in small doses. It is especially well adapted for the use of children, as the chocolate coating effectually masks the disagreeable taste of the components of the tablet.

Cystitis.

The therapeutic worth of our *Chocolate-coated Tablet No. 71*, "*Cystitis*," ℞ 1, has been definitely determined. We have added to our list a new tablet, half the size of No. 71, which will undoubtedly enjoy a similar measure of success. It will be known as *Chocolate-coated Tablet No. 202*, "*Cystitis*" (*half strength*). The following is its formula:

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Boric Acid, 1 grain.
Potassium Bicarbonate, 1 grain
Extract Buchu, 1-2 grain.
Extract Triticum, 1-2 grain.
Extract Corn Silk, 1-4 grain.
Extract Hydrangea, 1-4 grain.
Atropine Sulphate, 1-1000 grain.

We now manufacture a variety of Cystitis Tablets in plain, compressed, and chocolate-coated forms, for formulæ of which the reader is referred to our price list.

In acute or chronic Cystitis and other catarrhal inflammations of the urinary organs Pichi has been of the greatest service. For general use the Fluid Extract is perhaps the most advantageous preparation. But for persons who object to the taste of the Fluid, we would recommend a trial of our *Chocolate-coated Tablet No. 198, Pichi Extract, 3 grains.*

Diarrhea.

A recent addition to our list of Chocolate-coated Tablets that is especially seasonable is our *Chocolate-coated Tablet No. 196, Diarrhea* (Dr. Norman Gay). A glance at the formula will reveal the judicious selection of its component parts. Each tablet contains:

Powdered Opium, 2-5 grain.
Aromatic powder, 4-5 grain.
Camphor, 4-5 grain.
Bismuth subnitrate, 4-5 grain.
Powdered Kino, 4-5 grain.
Sodium bicarbonate, 4-5 grain.
Mercury with Chalk, 1-10 gr.

Dyspepsia (Gastrointestinal).

[See Catarrh (Intestinal).]

Notwithstanding the apparently complex nature of the formula, our *Compressed Tablet No. 339, Pepsin and Pancreatin Compound No. 2*, has proven eminently successful clinically. It may be used with advantage in those cases of enfeebled digestion in which gastrointestinal catarrh is the chief pathologic factor. Each tablet contains:

Pepsin Aseptic (1:3000), ¾ grain.
Pure Pancreatin, ¾ grain.
Bismuth Subnitrate, 1 grain.
Extract Nux Vomica, 1-10 grain.
Sodium Bicarbonate, 2 grains.
Powdered Ginger, ½ grain.

When dyspepsia is complicated by constipation our *Compressed Tablet No. 261 (Sugar-coated), Cascara Sagrada Extract, 2 grains*, will frequently meet the indication satisfactorily.

Gastritis (Chronic).

Chocolate-coated Tablet No. 207, Bismuth Subgallate Compound, No. 1, is an excellent combination for this obstinate ailment. Each tablet contains:

Bismuth Subgallate, 5 grains.
Pepsin Aseptic (1:3000), 1 grain.
Extract Nux Vomica, ¼ grain.

Gonorrhea.

[See Ophthalmia Neonatorum and Otitis Media.]

The latest and most promising remedy for the treatment of this affection is Mercurol, which we have just introduced to the notice of the profession. It is free from the usual objections attaching to the inorganic salts of mercury. Being a compound with Nuclein, the natural germicidal principle of the leucocyte, Mercurol acts kindly upon the tissue elements and consequently promotes the healing process. A more extended description of Mercurol will be found on page 49.

Heart Diseases.

As a trustworthy remedy in those affections in which cardiac tonics are indicated we believe the formula of our *Elixir Nitroglycerin Compound* will meet with general professional approval. Each fluidrachm of this Elixir contains:

Nitroglycerin, 1-100 grain.
Fluid Extract Digitalis, ½ minim.
Tincture Strophanthus, U.S.P., 2 minims.
Strychnine Sulphate, 1-50 grain.

The Tincture of Strophanthus and the Fluid Extract of Digitalis are physiologically tested. The latter produces the true tonic effect of the drug upon the heart and is much to be preferred to the uncertain and variable digitalin so often incorporated in similar preparations. Elixir Nitroglycerin Compound is rapidly absorbed and can be depended upon to yield prompt results in desperate cases.

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Icterus (Hepatogenous).

Granular Effervescent Kissingen has proven efficacious in certain cases of hepatogenous icterus and gout. It is a mild and agreeable aperient forming a refreshing draught, which closely approximates the natural water in effect.

Intestinal Indigestion.

[See Dyspepsia.]

As a useful remedy in intestinal indigestion, especially when the biliary secretion is deficient, the following combination is highly recommended. *Chocolate-coated Tablet No. 200, Ox Gall, Pancreatin, and Nux Vomica.* Each tablet contains:

Inspissated Ox Gall, 2 grains.
Pure Pancreatin, 2 grains.
Extract Nux Vomica, ⅛ grain.

Lithemia.

[See Rheumatism.]

The marked benefit derived from the use of Pichi in Lithemia has induced us to add to our list *Chocolate-coated Tablet No. 198, Pichi Extract, 3 grains.* To patients who object to the taste of the Fluid Extract, this tablet, or our *Soluble Elastic Capsule, No. 82, Pichi Extract, 5 grains,* is very acceptable.

Migraine.

An excellent and pleasant remedy is our *Granular Effervescent Caffeine Hydrobromate*, recently added to our list of Granular Salts. It has been found very helpful in controlling seasickness and the nausea occasionally incident to eye-strain.

Ophthalmology.

Among the recent additions to our list may be mentioned our new *Ophthalmic Tablet Homatropine Hydrobromate, 1-2 grain*, which is put up in tubes of ten tablets. This is designed to replace the one-grain tablet now appearing on our list. The latter was found to be too large and consequently too expensive for general use. As solutions of Homatropine are decidedly unstable, the smaller tablet will prove more economical where solutions of this salt are only occasionally required.

Ophthalmia Neonatorum.

[See Gonorrhea and Otitis Media.]

Dr. Eugene Smith recommends the use of Mercurol, the new Germicide. It has also been very successfully employed in chronic conjunctivitis, phlyctenula, and ulcer of the cornea. Mercurol, which is a true chemical combination of mercury with nuclein, is more fully described on page 49 of this number of the NOTES.

Otitis Media.

[See Gonorrhea and Ophthalmia Neonatorum.]

Most excellent results have been reported from the use of Mercurol, which does not irritate, but gently promotes repair. It destroys pyogenic germs thoroughly and rapidly. For detailed description the reader is referred to page 49.

Obesity.

Our *Granular Effervescent Kissingen Salt* conforms to the standard of the National Formulary. When dissolved in water it yields a sparkling beverage which resembles closely the natural water. This salt has lately been highly recommended by Dr. Wm. T. Cathell, of Baltimore, as a remedy for obesity. He recommends that a glass of Kissingen water, prepared from the Granular Effervescent Salt, be taken about twenty or thirty minutes after each meal, on one day. The next day he gives a glass of Vichy prepared from Effervescent Vichy Salt, after each meal, as before. This course is to be followed out until the desired reduction has been secured.

It is recommended in some cases to add to each glass of Kissingen water a small quantity of fresh lemon juice, to increase its acidity.

The action of artificial effervescent mineral waters can be further accelerated by the use of acidulous foods and drinks on the Kissingen days, and their avoidance on the Vichy ones.

G. E. Kissingen is useful in the treatment of jaundice and allied disorders and forms a pleasant and acceptable draught of sparkling water.

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Pharyngitis.

In Pharyngitis and Tonsillitis our new *Throat Pastilles* afford a very excellent and in fact superior substitute for the old-time gargle, inasmuch as it is exceedingly doubtful if any gargle actually reaches the posterior pharyngeal wall. They contain an efficacious combination of medicaments, in a pleasant and palatable form, and will be found very useful to allay local irritation.

Phthisis.

Dr. N. S. Davis, Jr., of Chicago, in the course of a paper on "The Treatment of Consumption," published in *Medicine* for August, 1896, states:

Nuclein possesses antiseptic properties, but above all the power of provoking a vigorous leucocytosis, which, it may be hoped, will stimulate the tissues to a more successful resistance of invading microorganisms. It has been claimed for nuclein that it is of use in tuberculosis and suppurative disorders.

Nuclein Capsules, each of which contains two grains of Nucleinic Acid, afford a convenient mode of administration.

Rheumatism.

No more elegant mode of administering salicylates could be devised than that afforded by our *Granular Effervescent Sodium Salicylate*, recently added to our list. This preparation embodies a remedy, well known of course and of undoubted value, in an agreeable form.

Each drachm contains 5 grains of Sodium Salicylate, combined with an effervescent base of Sodium and Potassium Citrate, flavored with Gaultheria.

We feel perfectly confident that a trial of this new member of our Effervescent group of remedies will demonstrate the superiority of this method of medication, especially with susceptible individuals.

Our *Compressed Tablet Lithium Citrate Effervescent* is thoroughly and rapidly soluble. We have established a special department equipped with every necessary facility for the manufacture of superior Lithia Tablets.

In chronic Rheumatism a very valuable formula is that which we have listed as *Chocolate-coated Tablet No. 210, Rheumatic No. 4.* Each tablet contains:

Lithium Salicylate, 5 grains.
Cimicifugin, ¼ grain.
Phytolaccin, ⅛ grain.
Colchicine, 1-150 grain.

Syphilis.

We have added to our list of mercurial preparations *Chocolate-coated Tablet No. 193, Mercurous Iodide Yellow, 1-6 grain.* There seems to be a growing demand for this tablet, which has become popular with many practitioners

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ANTISTREPTOCOCCIC SERUM IN PUERPERAL FEVERS.

BY C. E. PADDOCK, M.D.,

Professor of Obstetrics, Chicago Post-Graduate Medical School; Attending Obstetrician, Chicago Charity Hospital.

So far my cases have been limited, but the results have been excellent.

Case 1.—Mrs. S——, aged 26, German, primipara. No bacteriological examination. I first saw her six days after delivery. Temperature 105°, pulse 120. Vaginal examination disclosed laceration in perineum and pelvic floor, lacerated cervix, uterus movable, and involuting normally; lochia scant, pseudo-diphtheritic patches covering lacerations in vagina and cervix. Bichloride vaginal douche 1:3000, cleansing vagina and cervix with H_2O_2, and touching patches with silver nitrate, one drachm to one ounce. Did not enter the uterus because I was positive it was empty, and not wishing to carry any infection through the cervix into the uterus. Twelve hours later no change. Administered twenty cubic centimeters of Parke, Davis & Co.'s Antistreptococcic Serum. Six hours later thin watery discharge; temperature 100°, pulse 98. Twelve hours later membrane disappearing; temperature 100½°, pulse 100. Ten cubic centimeters serum administered. Twelve hours subsequent to this treatment membrane disappeared and

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pulse and temperature became normal. Two days following another ten cubic centimeters was injected. Quick recovery.

Case 2. — Mrs. J——, aged 32, Irish, multipara. Attended by midwife. Streptococcus infection. Saw her on the fifth day. Temperature 102½°, pulse 130. Vaginal examination disclosed no laceration, but a sero-sanguineous discharge, with slightly fetid odor; a thickening in region of right broad ligament. Bacteriological examination. Local and supporting treatment instituted. Twenty-four hours later temperature was 105°, pulse 120. Injection of twenty cubic centimeters antistreptococcic serum, the local and supportive treatment discontinued. Six hours later pulse was 110, temperature 101°. Twelve hours later temperature 99°, pulse 90. Ten cubic centimeters serum injected. Two days subsequent temperature normal; ten cubic centimeters given. Recovery uninterrupted. In this case all treatment excepting the serum injections was discontinued for clinical purposes.

Two other cases were equally successful.—*Medicine*, November, 1898.

THE NON-RETARDING ACTION OF COMBINED HYDROCHLORIC ACID ON STARCH DIGESTION.

BY A. E. AUSTIN, A.M., M.D.,
Professor of Medical Chemistry, Tufts Medical College, Boston.

I have shown that different albuminous foods combine with or neutralize the free hydrochloric acid of gastric juice, which then has no hindering action on the diastasic digestion of starchy food. This state of neutrality exists during a period of one to three hours after eating, according to the amount of nitrogenous food eaten. Under normal conditions the ptyalin of saliva digests most of the starchy constituents of food in the stomach within one or two hours. This takes place before *free* hydrochloric acid accumulates in the stomach to such an extent as to interfere temporarily with the diastasic action of saliva on starchy food.

The administration of isolated diastase [Taka-Diastase] considerably enhances the digestion of starchy food in the stomach, even under normal conditions.

Maldigestion of starchy food, due to deficiency of the diastasic power of saliva, can be regulated by the administration of isolated diastase [Taka-Diastase]. — *Boston Medical and Surgical Journal*, June 29, 1899.

PICHI: FABIANA IMBRICATA.

A Valuable Diuretic, Hepatic Stimulant, Terebinthinate, Bitter, Tonic, and Astringent.

BY HERVEY W. WHITAKER, M.D., COLUMBUS, OHIO.

The active principle of Pichi resides in the balsamic resin, and its medicinal properties may be described as slightly astringent, bitter, tonic, terebinthinate, diuretic, and hepatic stimulant. The remedy is available for diseases of the mucous surfaces, except in structural nephritic lesions.

The continued use of Pichi causes the appetite to improve, stimulates the gastric secretions, and increases assimilation; the chronic dyspeptic loses his sense of discomfort after eating; eructations cease, and flatulence is prevented; the tongue assumes a normal appearance, and chalky stools gradually become natural in color and consistency.

When Pichi is given during cystitis, ropy, alkaline, and fetid urine soon becomes clear, with normal reaction and specific gravity. Chronic cystitis with enlarged prostate yields its annoying symptoms to the action of this drug. Cystitis complicating gonorrhea, involving the prostatic urethra, is a combination which is apt to tax the ingenuity of the surgeon, yet this condition becomes more tractable and tolerable under the influence of Pichi.

Occasionally the value of Pichi may be increased by the simultaneous adminis-

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tration of such drugs as Jaborandi and Sodium Phosphate, while an increased quantity of pure water should be consumed daily to assist the diuretic and laxative effects. In all forms of hepatic disease this sterling remedy is indicated; in the earlier stages of cirrhosis it has proved eminently successful. I will cite a case of alcoholic cirrhosis occurring in a naval officer, who underwent two years' treatment with Pichi. Notwithstanding the fact that the man was at sea much of the time, and compelled to live upon an unsatisfactory diet, he improved rapidly, the liver became soft, and at the expiration of three years, when he left the ship, it was impossible to say that there remained any cirrhosis.

In gall-stones Pichi has proved a valuable remedy; it has seemingly lessened the frequency and severity of the attacks.

In the ufic acid diathesis, gout, chronic rheumatism, sciatica, lumbago, and in persistent headache with faulty secretions and excretions, this remedy should be preferred to the salicylates. It increases the appetite and assists digestion, while uric acid formations rapidly disappear from the urine. The preparation used by the writer is that of Parke, Davis & Co.—*Philadelphia Medical Journal*, Feb. 18, 1899.

Pichi was first introduced to the notice of the profession by Parke, Davis & Co., and the reputation which it now enjoys is based largely, if not wholly, upon experience gained in the use of their Fluid Extract.

THIRTY-TWO CASES OF DIPHTHERIA; NO DEATHS; THIRTY-SEVEN IMMUNIZATIONS.

BY W. S. DEVINE, M.D., MARSHALLTOWN, IOWA.

I was called by the Health Board of the village of Albion to investigate some cases of throat trouble which the attending physician thought might be diphtheria. They instructed me to go with the doctor to a family where one child had died and a little boy and his mother were dangerously sick. The mother could not speak above a whisper, the doctor remarking that she was cyanotic and would die. I injected the woman with 1500 units of Parke, Davis & Co.'s Antidiphtheritic Serum and $\frac{1}{60}$ grain of nitrate of strychnine. Returning twelve hours later I noticed improvement in her condition. I injected 1500 units of serum the second time, and from that time on her recovery was rapid. In forty-eight hours after the second injection the throat was clear.

In all thirty-two cases were treated and thirty-seven immunized—sixty-nine cases injected without a death. Two cases in this epidemic were treated by methods unknown to me by a physician who claims that antitoxin is a poison, both of which died. None of the patients treated by antitoxin have at any time, with one exception, complained of any annoyance except a slight rash which developed some days after the injection.—*Medical Council*, July, 1899.

CHRONIC DIARRHEA.

BY ROBERT L. PAYNE, M.D., NORFOLK, VA.,

Visiting Surgeon St. Vincent's Hospital; Ex-Member Board Medical Examiners of North Carolina; Ex-President North Carolina Medical Society, etc.

As to the medical treatment of chronic diarrhea, apart from such treatment as is addressed to diseases of distant organs bearing causative relations, I have long found that the vast majority of cases are most benefited by remedies used to promote stomachic and intestinal digestion. After determining which one of the pancreatic ferments is lacking, we may attempt to supply the want by the administration of these ferments as they are now supplied in the pharmacies, though I must confess I have had little success with them. As to the artificial digestive agents, papoid, caroid, etc., I have found little benefit from their use. From Taka-Diastase I have very generally found great relief when there was indigestion of starch.—*North Carolina Medical Journal*, April, 1899.

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A NEW AND POWERFUL GERMICIDE.

Mercurol, a True Chemical Compound of Nuclein with Mercury, Yields Brilliant Results in Gonorrhea, Cystitis, Ophthalmia Neonatorum, Ulcer of the Cornea, Otitis Media.

Mercurol is the latest addition to that family of remedial agents which now occupy such an important position in the materia medica—the germicides. Chemically, Mercurol is a true compound of yeast Nuclein with mercury; it is soluble in water, particularly in warm water, yielding solutions having a neutral or faintly alkaline reaction.

Various objections to the older antiseptics have been urged from time to time, and especially to the bichloride and other salts of mercury. In certain instances mercuric chloride acts as a decided irritant; and since it possesses great chemical affinity for cellular constituents, when brought in contact with animal tissues it forms insoluble compounds which retard the process of healing. This is especially true when the stronger solutions are used.

Recent investigations have shown that the leucocytes are the agents which absorb and transport metallic substances, like mercury and iron, through the circulatory system. The leucocytes also are the natural defenders of the organism against bacterial invaders. Metschnikoff has shown that they are phagocytic in character, and it is believed that they secrete Nuclein, as that substance has been isolated from the white blood corpuscle. Nuclein, when administered as a medicament, causes leucocytosis and consequently increases the quantity of natural Nuclein in the body. Professor Kossel, of Berlin, has shown that a 0.5 per cent solution of Nuclein is capable of speedily destroying cholera and typhoid bacilli, from which it seems reasonable to conclude that the leucocytes owe their germicidal power to Nuclein, which seems to be their essential element.

When a solution of mercuric chloride is applied to the tissues, a chemical reaction follows. The metallic base is gradually absorbed while the reaction of the acid portion with albuminous substances is manifested in coagulation. This effect, as we have already stated, gives rise to more or less irritation and retards the process of healing.

If now we prepare a soluble chemical compound of mercury with some substance, as Nuclein, which has a more intimate relation with animal tissues, it will unquestionably prove non-irritating, and instead of hindering it would promote cicatrization. Mercurol is just such a chemical compound. It is a powerful germicide, and its destructive action is very clearly manifested upon pyogenic organisms in general and the gonococcus in particular.

It is applied locally in a one-per-cent solution, which acts most happily when freshly prepared. It does not coagulate albumen; it is not caustic or corrosive; it destroys bacteria, especially pyogenic bacteria, thus controlling suppurative processes; it exerts a selective antagonistic action upon the gonococcus; it is not precipitated by alkalies.

Mercurol has been used with the most gratifying success in the treatment of chronic conjunctivitis, phlyctenula, ophthalmia neonatorum, corneal ulcer, acute and chronic suppurative otitis media, burns, stitch abscess, eczema aurium, specific urethritis and vaginitis, cystitis, and by hypodermatic injection to combat gangrenous processes. There seems to be a wide field of usefulness for Mercurol, since it is applicable without exception to every case where pus-forming organisms exist.

In the treatment of secondary syphilis, either per os, hypodermatically, or by inunction, Mercurol should receive the benefit of a clinical test, whenever the conditions are favorable.

We shall be pleased to supply literature to any physician who desires to investigate the properties of Mercurol. From the nature of its composition and the *rationale* of its action, we predict for this new germicide a brilliant record in the contest with pyogenic organisms.

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SOME OBSERVATIONS ON THE USE OF ANTITOXIN IN DIPHTHERIA.

BY C. M. SEBASTIAN, M.D., MEMPHIS, TENN.

The author presented an interesting series of case reports from his own practice in which he has used Antidiphtheritic serum for the treatment of diphtheria, with uniform success. Dr. Sebastian speaks briefly of two cases which marked the starting-point of the disease in his community. The first was treated by himself, but without antitoxin, and a fatal result followed. The second case did not fall within his own experience, and while antitoxin was administered, Dr. Sebastian feels convinced that the fatal result was due to its application too late to be of benefit. In concluding this interesting series of case reports, Dr. Sebastian writes: "I treated, concurrently with the foregoing, probably an equal number of cases of milder type in which I used no antitoxin, all of which recovered without sequelæ. I only gave antitoxin in cases presenting a somewhat grave prognosis. Every dose, almost without exception, was followed by perceptibly good results. No bacteriological examinations were made, reliance being placed on a clinical diagnosis in each case. In no case was it deemed expedient or practical to wait for bacteriological verdict from a laboratory, the urgency of symptoms requiring immediate use of the remedy. The antitoxin used was the product of Parke, Davis & Co."—*Memphis Medical Monthly*, May, 1899.

THE PRACTICAL ADVANTAGES OF MODERN STANDARDIZED PREPARATIONS.*

BY F. O. HAWLEY, M.D., CHARLOTTE, N. C.

We believe that we may truthfully state that since the advent of the chemical test no more important advance has been advocated in the history of pharmacy than the physiological system of assaying drug products. All honor to such a firm as Parke, Davis & Co. who were the first to put this system of standardization into practice, and who already have a large laboratory actively engaged in carrying out its principles. By this method the physiological effect of such cardiacs as Strophanthus and Digitalis is tested by administering them in fluid form to frogs and other animals, and subsequently vividly demonstrating their therapeutic value through the medium of Fraser's perfusion apparatus and by means of graphic tracings on the Ludwig kymograph and similar instruments. The oxytocic power of Ergot is demonstrated upon pregnant animals, and its related hemostatic action is estimated by feeding it to cocks and noting the reaction manifested by the comb and wattles—an active drug being able to produce such effect on the arterioles as to cause incipient or even complete gangrene of those parts. Cannabis Indica may be physiologically tested upon dogs or other animals, and its therapeutic activity measured by the consequent staggering gait, loss of muscular control, reduction of temperature, etc., which it manifests, followed by insensibility.

We might enumerate more, but these instances are sufficient to indicate the physiological means by which medicinal action may be tested upon respiration, blood-vessels, kidneys, intestines, muscle fiber, nerve centers, and nerve endings.

* *Charlotte Medical Journal*, May, 1899.

ONLY DRUGS YIELDING WELL DEFINED PHYSIOLOGICAL EFFECTS DESERVE RECOGNITION.

Apropos of the subject of the Revision of the Pharmacopœia, the *Maryland Medical Journal* has this to say: "Physiological effects, well defined and easily definable, should be characteristics absolutely necessary to win recognition. Each article should be rated, comparatively, upon the degree of certainty to which its action has been ascertained; and, lastly, this quality should by all means be fixed—should invariably agree with the standard established."

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FOUR CASES OF DIPHTHERIA IN ONE FAMILY.

BY C. W. GRAHAM, M.D., MILWAUKEE, WIS.

Within five days I made use of six vials of single X Antidiphtheritic Serum (250 to 500 units per Cc., Parke, Davis & Co.), with results so gratifying that I feel it to be my duty to submit the following report:

Case 1.—On February 2, 1899, I was called to the home of one of my patients in this city. I found that the oldest child, Katie, presented both tonsils covered with a yellowish-gray membrane, adherent and extending to the uvula. I prescribed zymocide and hydrogen peroxide, to be applied every hour; also one grain of calomel every hour for five hours, with brandy and milk in large quantities. On February 4 the membrane covered the entire surface of the pharynx and uvula. February 5, there being no improvement, I injected 1500 antitoxic units of single X Antidiphtheritic Serum (P., D. & Co.). The next day the membrane had begun to disappear. The little patient made an uninterrupted recovery.

Case 2.—Harry, aged five years, had a serous exudate covering both tonsils, yellowish in appearance, the condition resembling tonsillitis; temperature 103°; pulse 110. I prescribed for him as in the previous case, giving also the tincture of aconite and potassium iodide, internally, every two hours. On February 3 the tonsillar membrane had become white and glistening, investing the crypts, and on the 5th it had extended to the uvula and the posterior pharyngeal wall. Symptoms of croup now began to appear. I injected 1500 antitoxic units of P., D. & Co.'s single X Antidiphtheritic Serum. The patient being exhausted, I suspended all treatment except the brandy and milk. The next day he had slightly improved, when the dose of serum was repeated. February 9, the membrane had disappeared and the patient was on his way toward recovery.

Case 3.—On February 7 Bert, aged nine years, developed a patch on his right tonsil. I injected 1000 units of the same brand of serum as I used in the previous cases. By the 9th this child had fully recovered.

Case 4.—On February 7 Arthur, aged ten months, exhibited a membranous deposit on his right tonsil. His mother, dismayed by the suffering of the other children, refused to permit the injection of Serum. At 6 P.M. the membrane had spread, when I called in a consultant, who advised the use of the Serum, to which the mother consented. At 6.30 P.M. I injected 1500 units, P., D. & Co.'s single X Serum. On the following day the membrane began to disappear, and by the 10th the child was absolutely well. In Cases 3 and 4 no local applications were used. I depended entirely upon the Serum.

To summarize: In Case 1 my convictions are that the child was saved from a severe attack of croup, which was plainly imminent; Case 2 owes his life to the Serum, for without it he could not have survived two days, after the development of croup; Cases 3 and 4 were aborted within twenty-four hours after the injections.

I can heartily commend the Antidiphtheritic Serum of Parke, Davis & Co.

1015 KINNICKINNIC AVENUE.

The Opinion of the Entire Society.—During the recent smallpox epidemic in Denver, when doctors were vaccinating their patients by families, there was much discussion over the value of the different makes of vaccine virus. The matter was brought up in the Arapahoe County Medical Society, and the universal opinion seemed to be that the Aseptic Vaccine (Glycerinated) of Parke, Davis & Co. gave the best results. Those who had tried other vaccine almost invariably got septic infection, owing to lack of care in the preparation of the virus. It comes in securely sealed individual glass tubes, each passing bacteriological and physiological scrutiny before going to the public. —*Colorado Medical Journal*, April, 1899.

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THE TREATMENT OF SEPTICEMIA.*

BY H. A. HARE, M.D.,
Professor of Therapeutics in the Jefferson Medical College, Philadelphia.

The second case that I show you is that of a woman who is suffering from multiple septic arthritis, having its origin in an abortion from which she suffered ten days ago. The patient is very ill, and the expression and color of her face indicate well-advanced general septic poisoning. Her temperature is pretty constantly in the neighborhood of 103°, and she occasionally has rigors and sweats. Her uterus has been curetted, and it remains for us to dissipate as far as possible the general sepsis. For this I intend to institute two procedures: first, I am going to use an intravenous injection of a normal saline solution, with the object of diluting the poison and flushing the kidneys so as to eliminate the poison from the body as rapidly as possible. I also am going to order for her five cubic centimeters of Parke, Davis & Co.'s Antistreptococcic Serum, in order as far as possible to gain the benefits of this preparation in combating her sepsis.—*Medical Fortnightly.*

MODERN THERAPEUTICS.

BY WARREN B. HILL, M.D.,
Professor of Materia Medica and Therapeutics, Milwaukee Medical College.

A great deal of work is being done at present in perfecting antistreptococcic serum, but as yet we have been unable to produce a serum which can be accurately standardized. However, the work of perfecting it is being carried on in this country, as well as in Europe, and through the efficient work of Dr. McClintock, late of Michigan University, by the excellent facilities afforded him by Parke, Davis & Co.'s magnificent laboratory, there has been produced a serum which is giving good results. Last year I made a report of several cases which were benefited by its use; and now I may add that during the past year I have used it in a number of cases of severe facial erysipelas, with most happy results in every instance; in one case, in consultation, I recommended it in puerperal infection with equally good results.

* Extract from clinical lecture.

THE ANTISEPTIC AND ELIMINATIVE TREATMENT OF TYPHOID FEVER.

BY T. VIRGIL HUBBARD, M.D., ATLANTA, GA.

I am fully aware of the fact that the views herein expressed are at variance with some of the leading text-books of to-day and the teaching in most of our medical colleges; but "because a theory of treatment is new it is not necessarily false, and because it is old it is not necessarily true."

The most conspicuous and pronounced opponents of the antiseptic and eliminative treatment are, almost without exception, those men who have never systematically used it in even a limited number of cases, thus placing themselves in the absurd position of condemning this treatment without ever having given it a fair trial.

In the August, 1897, issue of the *Charlotte Medical Journal*, Dr. Woodbridge reported 7698 cases [of typhoid fever] with 150 deaths, a rate of 1.94 per cent mortality, with the average duration of twelve days. We must take into consideration the fact that these were all the deaths from the disease reported by the physicians. In a great many instances the treatment was in the hands of those inexperienced and unaccustomed to its administration. Frequently treatment was not instituted until late in the course of the disease, when fatal complications had already set in. Of the fatal cases, in only seven was the treatment begun prior to the eighth day of the disease. Can the most enthusiastic advocate of any other treatment show such a low mortality? The death-rate is the solid foundation upon which the superstructure of any treatment must finally rest.—*Virginia Medical Semi-Monthly*, June 9, 1899.

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TWO SEVERE CASES CURED WITH TAKA-DIASTASE.

BY DR. F. F. A. HOOGEN, ST. LOUIS, MO.

Case 1.—Patient 75 years old. Had suffered for one or two years from amylaceous indigestion; troubled with a flow of saliva, which caused him to expectorate continually, and constituted his real complaint. Because of this he suffered from a persistent thirst, and drank five or more gallons of water per day. He was losing flesh and growing weaker. Milk, oyster stew, and eggs constituted his diet, as other food caused pain in bowels. No sugar or albumin was present in urine. A few minutes after drinking water he would urinate. I placed him on Taka-Diastase, two grains during meals, three times a day, with Cascara Sagrada, P., D. & Co. In three days the eructations lessened greatly, and he resumed a regular diet of albuminous and starchy character. In fourteen days his excessive thirst ceased, and the flow of saliva was discontinued. He tired, however, of taking the capsules during meals, and was prejudiced against so doing. Finally, in opposition to my advice, he discontinued the treatment I had prescribed for him. Shortly thereafter he returned to me with all the previous symptoms and requested me to repeat the treatment he had been undergoing. He is now taking Taka-Diastase, and in a short time will be in perfect health.

I consider P., D. & Co.'s Taka-Diastase the most successful of all digestives pertaining to amylaceous indigestion.

Case 2.—Young lady, aged 16. Normal monthly courses since 13. She was suddenly taken ill with what her doctor termed epilepsy, and had been under specific treatment for this for about one year. Epileptic fits occurred at intervals of from six weeks to three months. Persistent vertigo and severe headaches. After each meal hiccoughs occurred, and upon examination I found her in bad condition, abdomen abnormally large, highly hyperesthetic, bowels constipated; otherwise she appeared healthy. My first step was to have her teeth attended to, although I continued the treatment for epilepsy with bromides, etc.; the result was negative.

After studying the case for about four weeks I reached the conclusion that she was suffering from amylaceous indigestion. Following my diagnosis of amylaceous indigestion I dropped all remedies for epilepsy and commenced the use of Taka-Diastase, two grains three times a a day, together with Cascara Sagrada. Amylaceous foods were forbidden unless boiled. The vertigo and headaches greatly lessened, and hiccoughs after meals were scarcely noticeable. The spasms never returned, and now after the lapse of a year she is free from all symptoms. I consider her in perfect health, and her parents, who were greatly discouraged, are now happy and joyous.

TREATMENT OF CEREBROSPINAL MENINGITIS WITH ANTI-STREPTOCOCCIC SERUM.

BY W. L. WARRINER, M.D., TOPEKA, KANSAS.

May D——, a strong, robust girl of 15, was taken sick on the 28th day of April, 1899, and I was called to see her on the morning of the 29th, at 5 A.M., when I found her suffering with intense pain in the head, which she described as "throbbing pains;" neck rigid; head thrown back; temperature 101° F.; pulse 120; pupils dilated; and all the other symptoms of the disease. The patient very soon after this became unconscious, and the pulse very variable, ranging in an hour from 50 to 120, and was different every time it was counted. Dr. J. P. Lewis, of this city, was called in consultation, and by 11 A.M. we began the use of Antistreptococcic Serum, giving ten cubic centimeters at that time hypodermatically, and another injection of the same amount at 4 P.M. of the same day.

The next morning the patient was semiconscious, and ten cubic centimeters was again given. On the third day the serum

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was used, the mind at this time being perfectly clear. On the fourth day the fourth dose was administered, and on the fifth day the fifth dose, with a constant and marked improvement, so that on the sixth day the serum was omitted. On the seventh day, the right knee-joint being badly swollen and painful, ten cubic centimeters of the serum was injected into the lower limb near the knee. Previous to this I had injected it into the subcutaneous tissue of the back, over the scapula. In a very few hours after this last injection the pain disappeared, and the swelling of the knee subsided.

From this time on recovery was rapid and uninterrupted.

The serum used in my case was made by Parke, Davis & Co., and great care was used in the technique by sterilizing the needle as well as washing off the place of injection with bichloride solution and afterward sealing the needle puncture with collodion. — *Therapeutic Gazette*, July, 1899.

A SEVERE CASE OF LARYNGEAL DIPHTHERIA.

BY GEORGE W. GREENE, M.D., AUBURN, N. Y.

I was called on October 23 to see a case of laryngeal diphtheria in a little girl. There was a membrane on the tonsils, also on the uvula. There was complete aphonia and labored breathing.

I have practiced medicine twelve years. Every winter I have treated from one to five cases of laryngeal diphtheria, resorting to every kind of treatment, including intubation and tracheotomy, yet I have never saved a case. In this case I injected 2000 units of Parke, Davis & Co.'s Antidiphtheritic Serum, and in two hours I could see improvement. The child remained completely aphonic for ten days, but eventually recovered. It was not necessary to intubate. No microscopic examination was made, but judging from the rapidity with which the antidote acted, I am sure that I had to deal with a case of genuine diphtheria, and that the serum saved the child's life.

CLEANSES AND PRESERVES, BUT DOES NOT INJURE THE TEETH.

BY C. E. ASAY, D.D.S., VISALIA, CALIF.

I have frequently been requested to indorse preparations for the mouth. Upon investigation I have usually found them to be absolutely injurious, their chief recommendation being that they whiten the teeth. When that is the case I am always suspicious. When I place fillings in the mouth I want to recommend something that will help to make the work of lasting benefit, and not something that will cause it to fail. I have found that Euthymol Tooth Paste is an excellent antiseptic, and as it is harmless I recommend it to my patients.

INFECTION DOES NOT FOLLOW THE USE OF ASEPTIC VACCINE.

We have been pleased—yes, delighted—with the satisfactory results with Parke, Davis & Co.'s Aseptic Vaccine.

To those who are in the least acquainted with their methods of serum-production it will be unnecessary for us to state that in the elaboration of the vaccine they guard every step with the most uncompromising scrutiny and assure the purity of the product by the most rigid antiseptic and aseptic measures. The heifers before being vaccinated are tested with tuberculin. As an additional safeguard the animals are slaughtered as soon as the vaccine is collected, and a careful inspection of the carcass is made by their veterinary surgeon and by an experienced meat inspector; if any evidences of disease are found the vaccine is destroyed. Aseptic vaccine is preserved in pure glycerin, and put up for shipment in hermetically sealed glass tubes. Furthermore, each lot of virus is carefully tested in selected cases, and if the most satisfactory and unequivocal resutls do not ensue the entire lot is destroyed.—From editorial in the March number of the *Southern Practitioner* by DEERING J. ROBERTS, M.D., Editor.

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:

Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & Co.]

EDITORIAL.

ARE YOU CONTEMPLATING POST-GRADUATE WORK?

If you are, you will in all probability visit one of the great American medical centers, such as New York, Baltimore, Chicago, St. Louis, Kansas City, or New Orleans, where a plentiful supply of clinical material is available, and the instruction is fully as thorough as in the medical centers of Europe.

We have Branch Houses in New York, Kansas City, Baltimore, and New Orleans, and local offices in Chicago and St. Louis. The gentlemen in charge of these Branches will be happy to receive a visit from any of our medical friends who may be pursuing postgraduate work in those cities. It affords us pleasure, therefore, to extend a cordial invitation to you to call at our local office whenever you may visit New York or any other city where we have a branch house. Samples of our preparations and literature relating thereto will be at your disposal, and any additional or local information which might be of service to the comparative stranger will be cheerfully supplied. At our home office in Detroit, or at any of our branches, the latch-string is always out to the physician.

DO NOT WAIT UNTIL ALARMING SYMPTOMS APPEAR.

The Prophylactic Use of Antitetanic Serum Involves No Formidable Operation.

There is evidence that the real value and the practical applicability of Antitetanic Serum are not as thoroughly understood or as generally appreciated as they should be. This circumstance may be due to the impression which has gone abroad that the successful administration of Antitetanic Serum involves a formidable surgical procedure, an operation beyond the technical skill of the average general practitioner. Such indeed has been the experience of those who have employed the Serum as a curative agent in the advanced stage of the disease. But why should the physician wait for the appearance of the alarming and dangerous symptoms that denote the onset of the tetanic seizure? Would it not be safer, more humane, and more scientific to anticipate the attack which usually terminates so disastrously?

It has been shown that guinea-pigs, and other animals inoculated with the poison of tetanus, survive when treated at once with Antitetanic Serum. In France, Nocard observed 375 animals of various kinds, all of which had been wounded, accidentally or surgically, and subjected to tetanic infection. These animals were given Antitetanic Serum at once, before the disease had time to develop. As a result, not a single case of tetanus occurred among them. On the other hand, he noted 55 traumatized animals that had been exposed to tetanic infection, every one of which developed the disease.

In the August number of *Medicine*, Prof. Geo. F. Butler, M.D., says: "Dr. Joseph Hughes, one of the most eminent and conservative veterinary surgeons in Chicago, has used the serum as a prophylactic in over 500 cases following wounds, both surgical and accidental." Not a single case of tetanus has developed, though Dr. Hughes has used the serum where by former experience he was justi-

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fied in expecting the disease to manifest itself.

From this and similar reports it has been proposed to immediately inject antitetanic serum in every case of traumatism of a suspicious character, hoping in this manner to prevent the subsequent development of tetanus. The serum is harmless to man and may be given hypodermatically as the other serums. Nocard recommends that a first injection of ten cubic centimeters should be made as soon as possible after traumatism. A second injection should follow in from twelve to fifteen days.

It has been suggested to inject prophylactically all new-born infants in certain sections of Europe in which trismus neonatorum prevails.

Our Antitetanic Serum is put up in boxes of three sealed tubes, containing ten cubic centimeters each.

THE TREATMENT OF DISEASES INCIDENT TO THE SUMMER SEASON—DIARRHEA, DYSENTERY, AND CHOLERA MORBUS.

Chlor-Anodyne is Preeminently the Remedy.

In dysentery and cholera morbus the pain is so acute and the tenesmus so constant that an anodyne of a reliable nature is urgently demanded by most patients. To this end we earnestly commend Chlor-Anodyne, a strictly ethical preparation, designed primarily for the relief of pain. An examination of its formula will convince any physician that this is an excellent combination, well adapted to a wide range of usefulness in medical work. The soothing effects of Chloroform and Indian Cannabis are supplemented by the soporific and analgesic effects of morphine. These acting upon the central nervous system are its most powerful ingredients; but though manifesting their effect in a different way, namely, upon the peripheral nerve ends, the capsicum, hydrocyanic acid, and peppermint oil contribute in no small degree to the happy results that usually follow the administration of Chlor-Anodyne (P., D. & Co.). This preparation has won its most brilliant victories during the heated term, when spasmodic seizures and attacks of intestinal colic prevail. It is never brought to the attention of the laity, as it is not a safe remedy in the hands of any one except the physician. Usually fifteen minims is the adult dose.

WILL BE MADE A PERMANENT FEATURE.

The "New Materia Medica," tentatively introduced into the last number of the NOTES, will be continued in succeeding issues and will afford a complete therapeutic index to the new remedies and new combinations of old, standard remedies, which we are adding to our list from time to time. The busy physician will find it well worth his while to utilize this very convenient and simple means of acquainting himself with our newer products, for they represent the best practical ideas and recommendations of our medical correspondents and of current medical literature.

Every formula added to our list means a considerable investment of capital in manufactured stock; and its utility must be strikingly manifest, its therapeutic worth must be stamped with the approval of our medical advisers, before we will incur the outlay. The addition of a new formula to our catalogue is a safe presumption of intrinsic merit.

THE TREATMENT OF SUDDEN SEVERE POSTPARTUM HEMORRHAGE.

It is my own practice, after the delivery of the child, after the uterus has been contracted, and the eyes of the baby have been attended to, to give the woman a drachm of ergot. In this connection I wish to mention the Aseptic Ergot prepared by Parke, Davis & Company, which I have used with universally good results. —DR. LESTER E. FRANKENTHAL, before the Chicago Medical Society.

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PHYSIOLOGICAL TESTS INDISPENSABLE.

AN ENERGETIC CONDEMNATION OF UNRELIABLE PREPARATIONS OF POWERFUL DRUGS.

Surely the physician has enough to perplex and baffle him in the idiosyncrasies of individual patients, and in the irremediable difficulties of diagnosis—may he not justly demand protection from the disaster which follows in the train of a weak, inert, unreliable drug product, or of a preparation possessing an unusual and dangerous potency? The golden mean between the worthless and toxic ought to characterize every fluid extract, solid extract, or tincture administered in the treatment of disease.

The very general use of diphtheria antitoxin and the growing employment of an antitetanic serum for prophylactic purposes have acquainted the profession with the fact that the curative serums can be tested and standardized only by the physiologic method—by observing how much of the serum will preserve from sickness a test-animal into which is injected simultaneously ten times the fatal dose of the respective toxin. This is indeed a tedious, laborious, expensive, and not absolutely uniform means of pronouncing on the exact strength of a given serum, but it is the only means available; there is no other, as no chemist pretends that he can test a parcel of antitoxin with his reagents. Every word of this applies with almost equal force to the testing of a limited number of powerful and important drugs like ergot, digitalis, squill, convallaria majalis, cannabis indica, and strophanthus. The chemical test for these drugs and their pharmaceutic preparations is very unreliable, and unless they are tested by the pharmacologist, on the living animal, their administration is a lottery affording no guarantee of prompt reaction or final cure. This fact is notoriously the cause of that unfortunate desuetude into which ergot and cannabis indica have largely fallen. Lacking uniformity of action and failing often to yield the expected results, the pharmaceutic preparations of the market are wholly discarded by the disappointed practitioner. Professor Hare, in his Therapeutics, ascribes the frequent failure of cannabis indica to the inferiority of the preparations encountered, and the worthlessness of much of the ergot on the market is beyond dispute. Witness also the report of Houghton (*Journal*, Oct. 22, 1898), who pharmacologically tested six samples "supposed to be pure strophanthin;" one sample was *ninety* times as strong as another, and the remaining four varied between these limits of one and ninety.

If drug preparations can be made uniform in strength by the comparatively simple and inexpensive means of chemical assay, well and good; otherwise the physician has a right to ask the wealthy and prosperous manufacturer to apply the physiologic test to preparations whose activity can be gauged in no other manner.—Editorial in the *Journal of the American Medical Association*, July 1, 1899.

AN EXCELLENT METHOD OF PRESCRIBING THE SALICYLATES.

We have recently added to our list a preparation of Methyl Salicylate with Colchicine which is free from disagreeable effects. It is put up in transparent globules, each of which contains three minims of methyl salicylate and $\frac{1}{250}$ grain colchicine. These globules are coming into quite general use in the treatment of rheumatism, gout, and allied conditions. We recommend a trial of our Globules of Colchicine with Methyl Salicylate to any of our medical friends whose experience with the alkaline salicylates has been unsatisfactory.

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ANODYNE PINE EXPECTORANT IS A SCIENTIFIC PREPARATION.

Useful in Pharyngitis, Laryngitis, Bronchitis, Asthma, and Croup.

Affections attended with cough as a prominent symptom, though more or less common at all seasons, are multiplied during cold weather. What the physician especially needs is a safe, yet efficient, remedy for the alleviation of cough and other premonitory symptoms of the various pulmonary troubles for which he is called upon to prescribe. Anodyne Pine Expectorant meets the indications nicely. Each fluidounce of this preparation represents:

White Pine bark, 30 grains.
Wild Cherry, 30 grains.
Sassafras, 2 grains.
Sanguinaria, 3½ grains.
Balsam poplar buds, 4 grains.
Chloroform, 4 minims.
Spikenard root, 4 grains.
Morphine acetate, 3-16 grain.

The dose of Anodyne Pine Expectorant is from one-half to two teaspoonfuls (2 to 8 Cc.) every three hours.

The astringent properties of Wild Cherry and White Pine bark are of peculiar service in inflammations of the respiratory tract. They exert a controlling influence upon the night sweats of phthisis. Wild Cherry contains hydrocyanic acid, which exercises a sedative effect upon the heart and circulation, thus tending to relieve local congestions. It also allays the disposition to cough and soothes the gastric nerves.

Sassafras and Balsam Poplar buds are aromatic stimulants, and Sanguinaria is a well known stimulating expectorant. These are helpful in chronic bronchitis or in the advanced stages of the acute disease. Authorities in therapeutics state that chloroform, especially when combined with an alkaloid of opium, is of signal utility in the management of whooping-cough, fibroid phthisis, and asthma. This combination will be found useful in any condition in which the cough is of a spasmodic character and out of all proportion to the expectoration. When swallowed slowly Anodyne Pine Expectorant allays coughs arising from a morbid condition of the tonsils and pharynx—the various types of "sore throat." Anodyne Pine Expectorant is a pleasantly flavored syrup. It represents all of the valuable properties of the drugs specified in its formula in full measure. We commend it to the consideration of our medical patrons, who, we believe, will find it very serviceable in the treatment of the various affections of the respiratory tract.

APOMORPHINE THE ANTIDOTE FOR STRYCHNINE POISONING.

In the *Medical Summary* for June, 1899, H. B. Stanley, M.D., advocates the use of Apomorphine as an antidote in strychnine poisoning. He says "we have a remedy in Apomorphine that has never failed in my hands, and I have had occasion to use it in over a hundred cases." The drug is best administered hypodermatically in quarter-grain doses, or one-half grain should be given per os. Even if cramping and convulsions have begun they will cease under the influence of Apomorphine, and the writer thinks every physician should carry a small bottle of Hypodermatic Tablets of Apomorphine for use in emergencies.

We list a line of these tablets varying in size from 1-20 to ⅛ grain Apomorphine, which we supply in tubes of 25 and bottles of 100 tablets.

ITS ACTION IS DEFINITE AND POSITIVE.

A reliable preparation of Convallaria is said to act most happily in calming the nervous symptoms and palpitation in cardiac irregularities. It is a cardinal remedy in exophthalmic goitre.

Our Fluid Extract Convallaria may be administered without hesitation, even in critical cases—for, being tested physiologically, its action is definite and positive.

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CLINICAL REPORTS.

Not a Single Death from Summer Complaint.

Your Pepsin Cordial I used a number of times last summer in cases where the child could not retain food in any form. My usual method of procedure was to give from one to five drops on the tongue, every hour, until the child stopped vomiting. As soon as the child could retain food, I ordered the cordial in ten-drop doses directly after feeding. The Pepsin Cordial I found not only aided digestion, but acted as an excellent stimulant, easily taken by children. In looking over my case-book I can't recall a single death from "Summer Complaint," so-called, or diarrhea; and I cheerfully add that your Pepsin Cordial was my greatest assistant in the majority of my cases.—Letter from DR. JAMES F. PRENDERGAST, 3833 Spring Garden St., Philadelphia, Pa., Physician to St. John's Orphan Asylum.

Prostatic Enlargement with Severe Inflammation of Entire Urinary Tract.

I had a patient with prostatic enlargement with severe inflammation, frequent and painful micturition, and great irritability of entire urinary tract. I determined to try your Globules of Saw Palmetto and Santal Oils. The result was all that could be desired. At the end of a week the patient, as he expressed it, "was a new man." Since treating this case I have used the Globules with equally good results. They are only one of many good things procured from you. —R. FRANK C. BROWNE, 176 Broadway, Providence, R. I.

The Mortality in Laryngeal Diphtheria Reduced from 90 to 20 Per Cent.

In a report of twenty-five cases of Laryngeal Diphtheria, treated by Antitoxin and intubation, Dr. Theodore J. Elterich, of Allegheny, Pa., speaks of the importance of using Antitoxin as early in the disease as possible, which will in many instances obviate the necessity of intubation. He used the Serum of Parke, Davis & Co. in several cases. Of twenty-five cases treated, five died—a mortality of but 20 per cent. When we consider that the mortality with other methods reached 90 per cent, and was reduced by intubation to 65 per cent, we must acknowledge that the results of the administration of the Antitoxin with intubation in the foregoing cases are highly gratifying.—*Archives of Pediatrics*, May, 1899.

Particularly Effective Combination.

At a recent meeting of the Louisville Therapeutic Society Dr. O. E. Bloch made the following statement: "A combination that I have recently been using and which is particularly effective in certain cases is a preparation manufactured by Parke, Davis & Co., viz., Elixir of Damiana, Nux Vomica, Iron, and Phosphorus. I have found this, in patients who are in an excited, nervous, and debilitated state, a very pleasant and effective nerve stimulant and tonic, and one that has proved extremely satisfactory in my practice."

Senile Erysipelas Successfully Treated with Antistreptococcic Serum.

It affords me pleasure to report that during the past winter and spring I have treated with entire satisfaction and success a number of cases of Erysipelas by the hypodermatic injection of Antistreptococcic Serum (P., D. & Co.). The disease had persistently resisted all other treatment. The cases were relapsing in character and in feeble senile subjects, but resolution took place without further relapse immediately upon the exhibition of the Serum.—A. IVINS COMFORT, M.D., Assistant Surgeon, National Home, Wis.

Nuclein in Puerperal Fever.

Of the Nuclein kindly sent me for trial in a case of puerperal fever, I used the entire amount, injecting forty-five minims daily after the first few doses. The pa-

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tient's condition was apparently hopeless, the puerperal state being complicated with pleuropneumonia. However, she began to rally quickly, and before the solution was entirely used the temperature had fallen to the normal and all traces of puerperal infection had vanished. —J. J. THOMAS, M.D., Cleveland, O.

No Fever and No Running Sores.

I have tried a great many makes of vaccine during the last ten years, many of which were worthless, and *none* equal yours in the glass tubes. During the last smallpox scare here I have used yours exclusively with *perfect* results —no fever nor running sores as of yore—in fact, am so well pleased with it that I will now risk it on myself.—W. H. EHLEN, M.D., Genesee, Idaho.

Inflammatory Diseases in the Female.

Dr. R. R. Kline, of Atlanta, Georgia, recommends Liquor Sedans to relieve pain and for its sedative effect on the generative organs. In referring to the after-treatment the author says: "Blaud's Iron and Arsenic Tablets have done me much good service when Iron has been indicated. The Parke, Davis & Co. Tablets are the best."—*Georgia Journal of Medicine and Surgery.*

Every Case Made an Excellent Recovery.

I find your Egg Emulsion to be a very palatable preparation of Cod-Liver Oil. I frequently prescribe it for lingering cases of grip with bronchial involvement. Every case for which I ordered Egg Emulsion, alternating with Hematic Hypophosphites (P., D. & Co.), has made an excellent recovery.—D. GORDON, M.D., C.M., Elmore, Minn.

Hopes to See it Universally Adopted.

I had opportunity to use your Antitoxin on several occasions lately, and I much prefer it to any other on the market. I feel confident that I shall see your preparation adopted universally. Its concentration is a great advantage, as it causes little inconvenience even in small children.—HENRY HOOPER, M.D., Chicago.

Delighted with It.

In regard to your Emulsion of Cod-Liver Oil, my patients who have been in the habit of using other nauseating emulsions are delighted with yours, and I use it exclusively in my practice, knowing its value and reliability.—WILLIAM H. BRYAN, M.D., Newton, Ga.

They Proved Entirely Satisfactory.

The samples of Globules of Colchicine with Methyl Salicylate (P., D. & Co.) proved entirely satisfactory. I used several of them myself, with the result of curing a mild attack of rheumatism.—R. B. LEISTER, M.D., State Hospital, Toledo, Ohio.

Good Results in Typhoid.

In the treatment of typhoid fever I have gotten good results from the Woodbridge treatment, especially the No. 3 prescription, giving the capsules three hours apart.—J. C. HOLMAN, M.D., Franklin, Texas, in the *Texas Medical News.*

Thirty Vaccinations with Entire Success.

C. M. Fenn, A.M., M.D., San Diego, Cal., writes: "I am pleased to say that I have recently used more than thirty of P., D. & Co.'s Vaccine tubes, not only with entire success, but without an untoward event."

A High Tribute to Antidiphtheritic Serum.

The XX Antitoxin of Parke, Davis & Co. and their new syringe have about landed my wife and two children on the safe side of the diphtheria epidemic.—CLYDE W. CRUMRINE, Charleroi, Pa.

Results Fine.

In a desperate case of malignant diphtheria, which I attended in consultation, I used Antitoxin, Parke, Davis & Co.'s by preference. Results fine.—WILLIAM MCKEAN, M.D., Canal Dover, Ohio.

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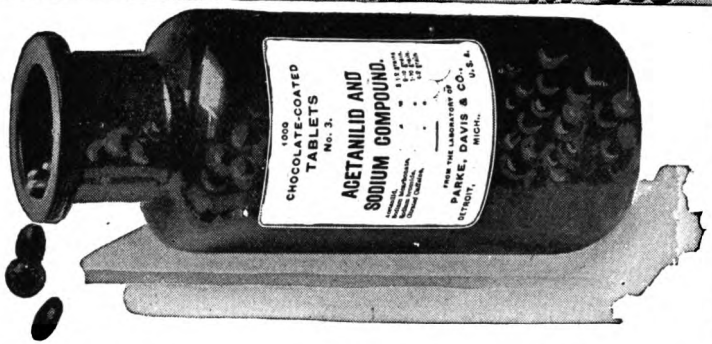

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Parke, Davis & Co.'s

CHOCOLATE-COATED TABLETS

DISINTEGRATE AND DISSOLVE QUICKLY.

We have TWO HUNDRED AND TWENTY-FIVE staple formulas from which you can make your selection of Chocolate-Coated Tablets.

For uniformity of size and shape, for care and excellence of workmanship, and beauty of finish, P., D. & Co.'s are not equaled.

In ordering or prescribing, if you will always specify P., D. & Co.'s Chocolate-Coated Tablets, you will not be disappointed.

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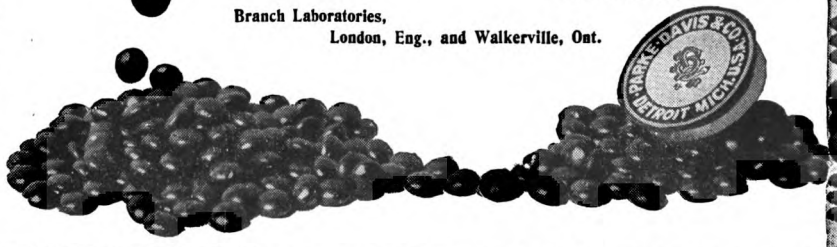

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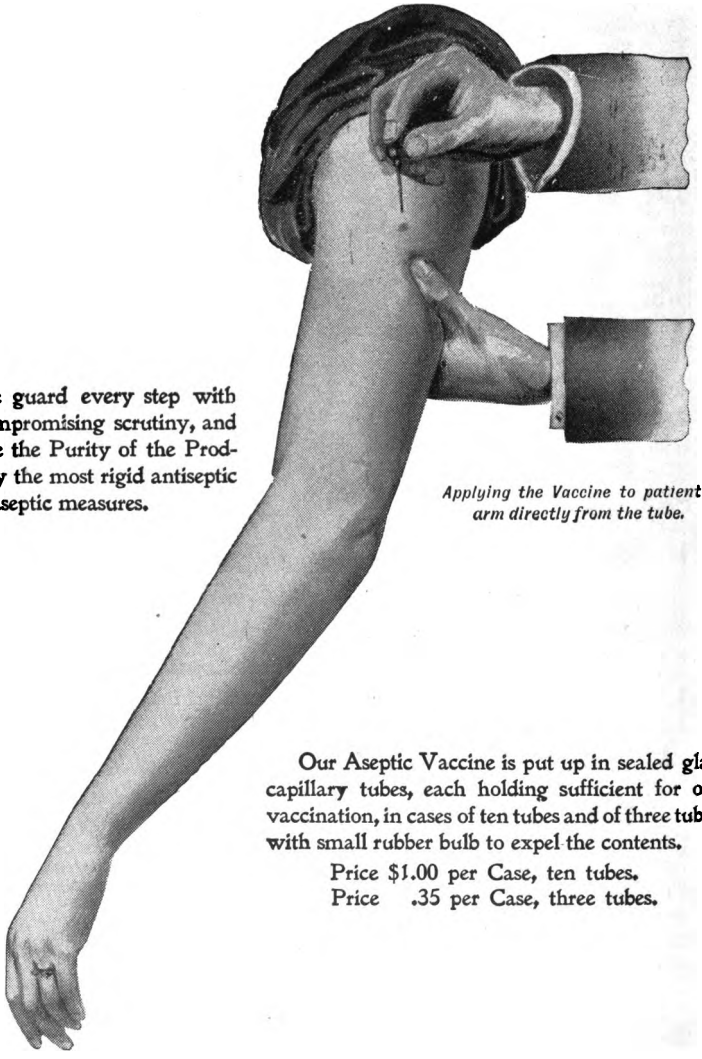
ASEPTIC VACCINE

PHYSIOLOGICALLY AND BACTERIOLOGICALLY TESTED.

(GLYCERINATED)



We guard every step with uncompromising scrutiny, and assure the Purity of the Product by the most rigid antiseptic and aseptic measures.

Applying the Vaccine to patient's arm directly from the tube.

Our Aseptic Vaccine is put up in sealed glass capillary tubes, each holding sufficient for one vaccination, in cases of ten tubes and of three tubes, with small rubber bulb to expel the contents.

Price $1.00 per Case, ten tubes.
Price .35 per Case, three tubes.

Home Offices and Laboratories, Detroit, Michigan.

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MERCUROL

(A New Chemical Compound of Nuclein with Mercury.)

A POWERFUL GERMICIDE.

A TRUE CHEMICAL COMBINATION

YIELDS BRILLIANT RESULTS IN

GONORRHEA,
CYSTITIS,
OPHTHALMIA NEONATORUM,
ULCER OF THE CORNEA,
OTITIS MEDIA,
ETC

An organic combination in the form of a brownish-white powder, soluble in water, especially warm water; insoluble in alcohol. It does not precipitate albuminous liquids, and is not precipitated by alkalies. It destroys BACTERIA, and exerts a selective antagonistic action upon the GONOCOCCUS. Wherever pus-forming bacteria exist there Mercurol is indicated. Ordinarily used in one per cent. solution. It is not caustic nor corrosive, and is non-irritating. Literature mailed on application.

In ounce vials, -	per ounce, $1.75.
In half-ounce vials,	per ounce, 1.80.
In quarter-ounce vials,	per ounce, 1.85.

PARKE, DAVIS & COMPANY,

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BIOLOGICAL PRODUCTS

ARE USED SUCCESSFULLY BY PHYSICIANS THROUGHOUT THE LAND.

We call your attention to the following, and earnestly solicit your correspondence if further information is desired . . .

ASEPTIC VACCINE,
For immunization against Smallpox.

ANTIDIPHTHERITIC SERUM,
For Diphtheria.

ANTISTREPTOCOCCIC SERUM,
For Puerperal Fever, Erysipelas, Scarlatina, etc.

ANTITETANIC SERUM,
For Tetanus (Lockjaw).

ANTITUBERCLE SERUM,
For Tuberculosis.

COLEY'S MIXTURE,
For the treatment of inoperable Tumors (Sarcoma).

CULTURE MEDIA,
For use in bacteriological work.

MICROSCOPIC SLIDES,
For microscopic diagnosis. Mounted in balsam.

NUCLEIN,
For incipient Tuberculosis, etc.

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O'S

Therapeutic Notes

PUBLISHED BY PARKE, DAVIS & CO.,
DETROIT, MICH.

No. 4. Sixth Year. November, 1899.

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MERCUROL

(A NEW CHEMICAL COMPOUND OF NUCLEIN WITH MERCURY.)

A Powerful Germicide. A True Chemical Combination.

YIELDS BRILLIANT RESULTS IN

Gonorrhea, Cystitis, Ophthalmia Neonatorum, Ulcer of the Cornea, Otitis Media, Etc.

Mercurol is particularly destructive to pyogenic organisms. It exerts a selective antagonistic action upon the Gonococcus, whether found in the urethral crypts or in the conjunctival sac. In urethritis and vaginitis of specific origin, as an antiseptic dressing in abscesses, to control suppurative conditions, and in fact wherever pus-forming bacteria exist, there Mercurol is indicated. It is neither caustic, corrosive, nor irritating. Ordinarily used in one-per-cent solution. Literature cheerfully mailed on application.

In ounce vials,	**per ounce,**	**$1.75**
In half-ounce vials,	**per ounce,**	**1.80**
In quarter-ounce vials,	**per ounce,**	**1.85**

PARKE, DAVIS & COMPANY,

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TAKA-DIASTASE

THE

MOST REMARKABLE

STARCH DIGESTANT

EVER BROUGHT TO LIGHT.

POWERFUL,

PROMPT, PROLONGED

IN ITS ACTION.

PARKE, DAVIS & CO.

NO OTHER SERUM

German, French or American, HAS EVER YIELDED SUCH HIGH PERCENTAGES OF RECOVERY.

Chicago Mortality 4.78 per cent.

In Chicago during the months of November and December, 1898, and January and February, 1899, there were treated with Parke, Davis & Co.'s Antidiphtheritic Serum by the Antitoxin Staff of the Chicago Health Department 418 cases (microscopically verified), with 20 deaths—a mortality of 4.78 per cent.

Denver Mortality 3.5 per cent.

In Denver during 1898 there were treated with Parke, Davis & Co.'s Antidiphtheritic Serum 230 cases, with 8 deaths—a mortality of 3.5 per cent.

PARKE, DAVIS & COMPANY,

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Therapeutic Notes

SIXTH YEAR. DETROIT, MICH., NOVEMBER, 1899. No. 4.

THERAPEUTICS.

MERCUROL: A NEW GERMICIDE.

BY EUGENE SMITH, M.D., DETROIT, MICH.,
Professor of Ophthalmology and Otology in the Detroit College of Medicine.

Last September (1898) Dr. Schwickerath, of Detroit, brought to me for trial a nucleid of mercury which he named Mercurol. It is a whitish powder readily soluble in water, with a faintly alkaline reaction. Albuminous substances are not coagulated by the addition of a Mercurol solution, hence no coagulum is formed when it is brought in contact with mucous membranes. The property of nuclein being nearly related, chemically and physically, to the properties of mucous membranes, Mercurol is seemingly rendered more diffusible—that is, more deeply penetrating.

As to the composition of Mercurol, it is a definite chemical compound of mercury with nucleinic acid from yeast, containing about ten per cent of mercury.

There is no immediate discomfort upon its use in the conjunctival sac, even to a five-per-cent solution, but in this strength, from fifteen to thirty minutes after instillation, a severe burning begins, and with considerable lacrimation lasts for one or more hours. Unlike the silver salts, it does not increase the secretion of mucus, but causes a marked diminution of the discharge. It is a marvelously strong germicide.

I have used it in many cases of chronic conjunctivitis, blepharitis, phlyctenula, and in one case of ophthalmia neonatorum; also in several cases of small ulcers of the cornea, and in all with fine results. In acute and chronic suppurative otitis media, by intratympanic injections, I have had most elegant results, the relief being rapid. I found its use most valuable in a case requiring an artificial drum. Saturating the cotton with a five-per-cent solution relieved the irritation and by its agglutinative properties held the cotton drum *in situ*. The cotton drum was left in at one time for more than two weeks without causing disturbance of any kind, whereas with other medicaments a suppuration was excited. The pus from the case of ophthalmia neonatorum was loaded with gonococci; improvement was very rapid, much more so than has been my experience with the silver salts. As an external application in burns of the eyelids and face (burns of the skin) I have seen happy and most rapid effects. The same happy results have followed its use in stitch abscess. As an antiseptic dressing it has a fine effect. I used it in ointment form in preference to the yellow oxide of mercury. The fact that microorganisms cut no small figure in the many disorders of the eye and ear, and the rapid relief which follows its use in many cases, is to me strong proof of its most excellent germicidal qualities. I use it commonly before and after cataract extractions—one-per-cent solution—as an antiseptic, and look upon it as about the only strong antiseptic which can be safely used in the conjunctival sac. It produced a rapid relief of eczema aurium in several cases. I applied it once a day in each case.—*The Physician and Surgeon*, April, 1899.

For the past two years I have used Taka-Diastase considerably in cases of amylaceous dyspepsia, with excellent results.—A. GRANT STEWART, M.D., 601 Sherbrook St, Montreal.

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THE NEW MATERIA MEDICA.

INDEX OF DISEASES AND REMEDIES—MERITORIOUS PREPARATIONS ADDED TO OUR LIST SINCE ISSUING THE SEPTEMBER "NOTES."

Alcoholism (Chronic).

[See Convalescence.]

Chocolate-coated Tablet No. 211, Strychnine Phosphate, 1-50 grain, may be used with advantage as a general tonic and stomachic in the treatment of this condition. In a measure it is to be preferred to the alkaloid. We also supply this drug in the form of *Gelatin-coated Pill No. 872, Strychnine Phosphate, 1-100 grain*, and *Chocolate-coated Tablet No. 156, Strychnine Phosphate, 1-100 grain.*

Bronchitis.

An excellent remedy in inflammations of the respiratory tract is *Fluid Extract Cocillaña*, in doses of 10 to 30 minims. It has been highly recommended as an efficient substitute for ammonium carbonate and other expectorants. For further particulars see page 78.

Catarrh (Gastroduodenal).

Mercury with chalk is as popular with some practitioners as calomel is with others. We offer a very complete assortment of Tablet Triturates containing this medicament. The latest addition is *Tablet Triturate No. 741, Mercury with Chalk, 1-2 grain.* We have for some time supplied Tablet Triturates of Mercury with chalk of one-tenth, one-fifth, one-third, one, and two grains, as a reference to our price list will show. Mercury with chalk is very efficacious in many cases of secondary syphilis. It is a valuable hepatic stimulant, antiseptic, and anthelmintic. It forms an important remedy in the treatment of diarrhea and dysentery.

Constipation.

[See Lithemia.]

Compressed Tablet No. 342, Rhubarb and Ipecac Compound No. 3 (Roosevelt Hospital), will be found to be an excellent laxative for general use. Each tablet contains:

Powdered Rhubarb, 2 grains.
Powdered Ipecac, 1-4 grain.
Sodium Bicarbonate, 5 grains.
Tincture Nux Vomica, 5 minims.
Oil Peppermint, 1-20 minim.

We can also furnish *Compressed Tablet No. 343, Rhubarb and Ipecac Compound No. 4* (Dr. M. L. Goodkind), which is somewhat similar to No. 342. Each tablet contains:

Powdered Rhubarb, 1 grain.
Sodium Bicarbonate, 5 grains.
Powdered Ipecac, 1-8 grain.
Extract Nux Vomica, 1-4 grain.
Oil Peppermint, 1-10 minim.
Fluid Extract Cascara Sagrada, 5 minims.

Convalescence.

[See Alcoholism (Chronic).]

As a general tonic during convalescence from typhoid, intermittent, and many other acute diseases, our *Chocolate-coated Tablet No. 199, Iron, Quinine, and Strychnine Phosphates*, will be found very helpful. Each tablet contains:

Iron Phosphate, precipitated, 1 grain.
Quinine Phosphate, 1 grain.
Strychnine Phosphate, 1-32 grain.

This tablet represents one fluidrachm of Easton's Syrup, known also as Aitkin's Syrup, Syrup of the Triple Phosphates, etc. Its formula is based upon that published in Squire's Companion to the British Pharmacopœia. This combination is of recognized value in the treatment of anemia and chlorosis, and in certain types of neurasthenia.

Coughs.

[See Phthisis and Bronchitis, Acute.]

Insomnia.

[See Vomiting; Wounds.]

We recommend a trial of the new hypnotic and anesthetic, *Chloretone*, introduced to the notice of the medical pro-

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fession by Drs. Houghton and Aldrich. We are prepared to supply *Chloretone* in the form of crystals or Sugar-coated Tablets of three grains each. An abstract of the authors' original paper will be found on page 72.

Lithemia.

In rheumatism, gout, and in fact all conditions in which the lithium salts are of benefit and constipation happens to be a disturbing factor, the practitioner will find our *Effervescent Laxative Lithia Salt* very useful. Each heaping teaspoonful contains:

Potassium Citrate, 30 grains.
Sodium Phosphate, 30 grains.
Lithium Citrate, 5 grains.

Our *Artificial Lithia Mineral Water Salt* is another preparation which we recommend heartily to our medical patrons.

Operative Surgery.

Germicidal Soap, Mild, is especially serviceable in preparing the patient for operation. It is used in hospitals with perfect satisfaction for cleansing the hands and arms of the operator and his assistants. In private practice it may also be used for preparing the antiseptic solutions in lieu of bichloride tablets. *Germicidal Soap, Mild*, is half the strength of our regular preparation and is especially adapted to the needs of those operators who find mercuric solutions of the usual strength too irritating.

Phthisis.

[See Coughs.]

Often the physician wishes to employ a simple yet efficient remedy for the alleviation of the annoying and frequently ineffectual cough of the incipient stage of phthisis. We desire to submit for trial in such conditions our *Chocolate-coated Tablet No. 205, Cough* (Palliative). Each tablet contains:

Extract Indian Cannabis, ¼ grain.
Codeine Sulphate, ¼ grain.

Syphilis.

[See Catarrh (Gastroduodenal).]

We recommend a trial of *Mercurol*. It is a product of the chemical union of nuclein with mercury and may be given in doses of from $\frac{1}{20}$ to $\frac{1}{10}$ grain in secondary syphilis. Nuclein is nature's germicidal principle found in the leucocytes; its combination with mercury would therefore seem to be an ideal one for this condition.

Mercurol, being a powerful germicide, is used in much the same manner as mercuric bichloride in the treatment, by local application, of gonorrhea, ophthalmia neonatorum, otitis media, cystitis, and other diseases whose etiology depends upon the presence of infectious organisms. Literature on *Mercurol* will be cheerfully sent, postage paid, to any physician who will favor us with a request for it.

Tuberculosis.

In tuberculosis and other diseases in which malnutrition plays an important part, *Nuclein* has yielded remarkably good results. We have recently added to our list *Capsules of Nuclein*, each containing two grains of nucleinic acid from yeast. One capsule is usually given between meals and one at bedtime.

Vaccination.

For the convenience of physicians who prefer not to keep a larger number of vaccine tubes on hand we can now supply packages of *Aseptic Vaccine* containing three tubes and one rubber bulb for ejecting the lymph.

Vomiting (Reflex, Carcinoma, Pregnancy, etc.).

[See Insomnia; Wounds.]

Chloretone in powder or three-grain tablets is highly commended. For full particulars kindly refer to page 72.

Wounds (Burns, etc.).

[See Insomnia; Vomiting]

Chloretone in aqueous solution is not only antiseptic but markedly anesthetic in its action. It would seem, therefore, to be the ideal antiseptic in the treatment of burns, painful injuries, etc. A detailed description of the properties of Chloretone will be found on page 72.

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THE TREATMENT OF DIARRHEA AND DYSENTERY WITH INTESTINAL ANTISEPTICS.

BY LUCIEN LOFTON, M.D., EMPORIA, VA.,

President Seaboard Medical Association of Virginia and North Carolina.

After having tried nearly all the recognized astringents I failed to accomplish marked success in dysentery. I then began the use of the Woodbridge Treatment in these cases of chronic intestinal catarrh, as indicated by Dr. Woodbridge, as if I had a pure infection of Eberth's bacillus.

Certainly the Woodbridge Treatment is free from danger. Upon one occasion a representative of Parke, Davis & Co. spent an hour telling me of the usefulness of the Woodbridge method. He did not tell half the story, but practical experience since has told it in unmistakable terms. —*Virginia Medical Semi-Monthly*, July 7, 1899.

THE USE OF CASCARA SAGRADA IN HABITUAL CONSTIPATION.

BY HAROLD N. MOYER, M.D.,

Assistant Professor of Medicine, Rush Medical College, Chicago.

For more than twelve years past the writer has used, almost to the exclusion of other drugs, Cascara Sagrada in the treatment of habitual constipation. He has always used the original fluid extract of Parke, Davis & Co., which contains all the nauseous and bitter properties of the preparation. The patient receives an ounce of the fluid extract, a dropper, and some large sized capsules. He is instructed to begin with fifteen, twenty, or twenty-five drops, according to the apparent necessities of the case. This amount is to be placed in the capsule just before taking. The dose is always given at night, and as the drug has a very slow action its effects are usually not noted until the following morning. The empty capsule is easily filled by the patient, and the nauseous effect of the drug is not observed. The dose is increased, if needed, by five drops each night, until the quantity is reached that causes a bowel movement; the drug is continued at this dose for a few days, and the quantity is then gradually reduced one drop each night until the administration ceases. The administration of this drug in series in this way overcomes that tendency to relapse which is so persistent in cases of torpidity of the lower bowel.

Cascara Sagrada is the only drug that stimulates peristalsis and at the same time permits of a gradual lessening of the dose without marked decrease in its therapeutic effect. Used in the way here described we believe it is the most efficient medicinal means at our command in the treatment of habitual constipation.

THE TREATMENT OF CHRONIC MALARIAL POISONING WITH GRINDELIA SQUARROSA.

BY W. L. LEISTER, M.D., ROGERS, ARK.

We have used Grindelia Squarrosa extensively in the treatment of chronic intermittent malaria with uniform success. Given a case of recurring chills with hypertrophic spleen, fulness of stomach, sallowness, inclination to cyanosis, and Grindelia Squarrosa will give satisfaction.

Professor Bundy says: "I have cured over seventy cases in the past four years, and have yet to see the case it will not cure when properly given." Dr. Bundy's method of giving this agent was by means of this prescription:

℞ Extracti Grindeliæ Squarrosæ Fl (Parke, Davis & Co.), ʒ iij.
Syrupi Acaciæ,
Aquæ destillatæ, ää ʒ ij.
M. Sig.: A teaspoonful four times daily.

—Editorial in the *Southwestern Progressive Medical Journal*, August, 1899.

---

125 VACCINATIONS, 122 SUCCESSES.

Dr. L. A. Sutton, of Hopewell Junction, New York, reports that he has recently used our Aseptic Vaccine in 125 cases, with 122 successful results. The doctor expresses himself as highly pleased with the large percentage of successes yielded by Aseptic Vaccine.

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THE PATHOLOGY AND ETIOLOGY OF RHEUMATISM, WITH SOME REMARKS ON TREATMENT.

BY CUVIER R. MARSHALL, A.M., M.D., DETROIT.

[*New York Medical Journal*, Aug. 12, 1899.]

The successful treatment of rheumatism, as we understand it to-day, was elaborated in the school of bedside experience. In the acute form there is no remedy at all comparable with the salicylates. By their administration pain is relieved, the temperature is controlled, the tendency to the development of endocarditis is checked, and the local arthritic inflammations are alleviated.

There is one precaution to observe when prescribing the alkaline salicylates, and that is to insist upon having dispensed only the purest drugs obtainable.

A very excellent preparation is the Elixir of Manaca and Salicylates made by Parke, Davis & Co. It contains thirteen grains to the fluidrachm of the combined salicylates of sodium, potassium, and lithium, together with ten grains of Manaca, itself a valuable alterative and antirheumatic. This Elixir is especially useful during the subsidence of the acute symptoms, when it is desired to keep up the effect of the larger doses of the salicylates often required in the primary stage. In subacute and chronic cases the administration of the Compound Elixir of Salicylic Acid (Parke, Davis & Co.) yields gratifying results when persistently continued. It contains forty grains of salicylic acid and four grains of potassium iodide to the fluidounce, with cimicifuga and gelsemium. The amount of iodide can be judiciously increased, while in obstinately chronic cases I have found the addition of from five to ten minims of the wine of colchicum root very effective, especially when intestinal peristalsis is diminished and the resultant constipation has become a prominent complication. Within recent years the salicylate of methyl has come into more general use in the treatment of the pain of acute articular rheumatism.

The most convenient mode of administration is by means of the gelatin Globules of Methyl Salicylate with Colchicine, originally introduced into this country from France, but now made by the well known firm referred to above.

Quite as important as the early administration of the proper remedies is it to take care to continue their use for some time, even after the patient seems to have completely recovered from the acute attack. In this stage the Elixir of Salicylic Acid and the Elixir of Manaca and Salicylates, previously mentioned, will prove especially serviceable. Many an otherwise promising case has relapsed and undergone a prolonged and tedious convalescence by reason of neglect of this simple precaution.

TREATMENT OF TYPHOID FEVER.

BY T. VIRGIL HUBBARD, M.D., ATLANTA, GA.

In the August, 1897, issue of the *Charlotte Medical Journal* Dr. Woodbridge reports 7698 cases, with 150 deaths—a rate of $1\frac{94}{100}$ per cent mortality—with the average duration of about twelve days. We must take into consideration the fact that these were all the deaths from the disease reported by the physicians, and in a great many instances the treatment was in the hands of those inexperienced and unaccustomed to its administration, and not instituted until late in the disease, when fatal complications had already set in. There are only seven of the fatal cases in which treatment was begun prior to the eighth day of the disease. Can the most enthusiastic advocate of any other treatment show such a low mortality? For the death-rate is the solid foundation upon which the superstructure of any treatment must finally rest. *The two important facts to be emphasized in this treatment are, to begin it as early as possible, and keep it up continuously until the disease is under control.—Memphis Lancet*, May, 1899.

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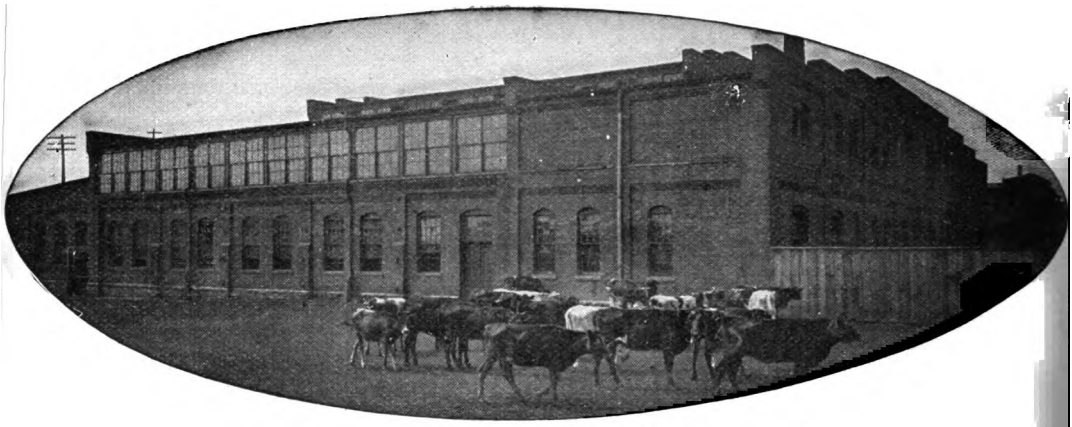

FIG. 1.—A Group of Vaccine Heifers.

JENNER'S IMMORTAL DISCOVERY.

THE EXTINCTION OF SMALLPOX WELL-NIGH ACCOMPLISHED BY VACCINE VIRUS—SOME STARTLING FIGURES—DELICATE, PRECISE, AND PAINSTAKING METHODS OF PRODUCING AND TESTING THE LYMPH—RECENT IMPROVEMENTS IN MANUFACTURE—HOW DISEASE GERMS ARE EXCLUDED.

The vivid descriptions of smallpox epidemics in the pages of the great historians ought to teach us modern mortals what the loathsome disease must have meant in horror and dread to all mankind before the efficacy of vaccination became generally acknowledged.

Even more impressive than the classical pictures of the historians is the evidence presented by the statistics in which are crystallized the experience of entire nations. A calamitous smallpox epidemic raged in Germany during 1870–71, carrying off 143,000 victims in a population of 50,000,000, and in 1874 a law was enacted making vaccination obligatory in the first year of life and revaccination also obligatory at the tenth year.

In consequence of this law smallpox has been so successfully stamped out in Germany that the annual loss of life from this disease is only 116!

Similar figures are afforded by every civilized country, and the lesson they teach is reenforced by the disastrous experience of many careless communities which have temporarily neglected to perform systematic vaccination among the people. The city of Montreal can bear sorrowful witness, from its epidemic in 1885, and the English city of Gloucester, from its outbreak of smallpox in 1896, to the appalling evil which is likely to follow concessions made to antivaccination sentiment.

OPPONENTS OF VACCINATION.

The principal stock in trade of those who oppose vaccination is borrowed from the ancient and discarded method of "arm to arm" inoculation, syphilis and possibly other diseases being thus communicated from child to child. In the vehement objections to animal vaccine the tubercular germ has been the great bugaboo. But our methods of selecting cattle and our use of glycerin to kill any possible germs in the vaccine exclude that danger perfectly.

But to these unfounded and childish grounds of opposition must be added others of more weight and truth. Not

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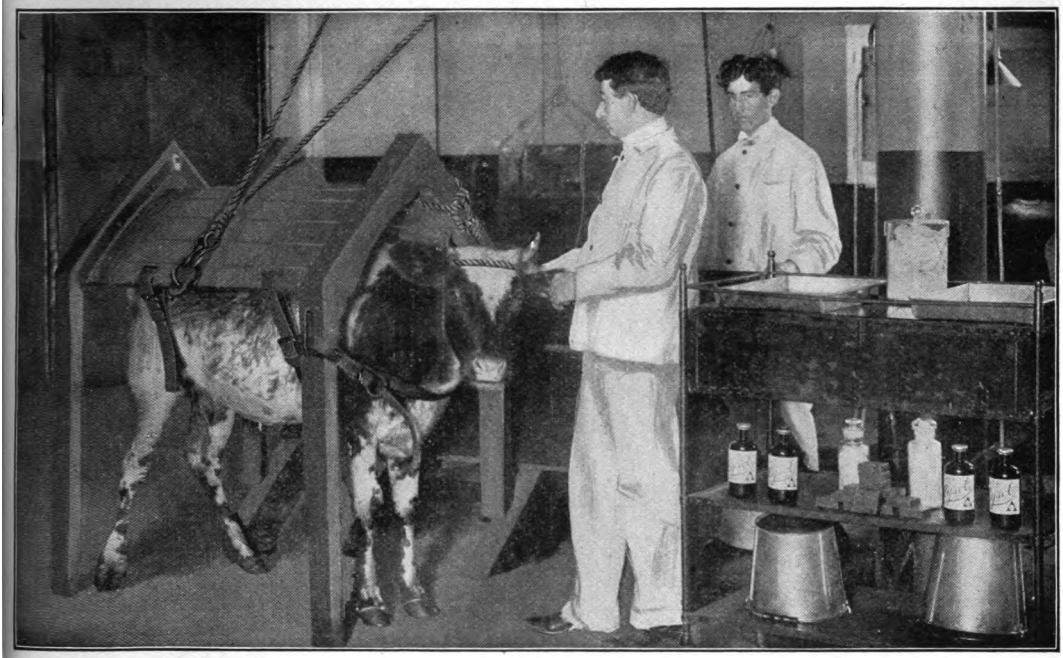

FIG. 2.—"Ready to Invert."—Aseptic Instrument and Dressing Case on the Right.

without reason have the antivaccinationists protested against the ulcerations, inflammations, abscesses, and sloughings with which vaccinators have been only too familiar in the past, thanks to the general use of germ-infected "points." The cry of reprobation against these things is not to be silenced by calling people cranks when our best authorities and warmest advocates of vaccination tell us that the old-fashioned "points" fairly *swarm* with disease germs.

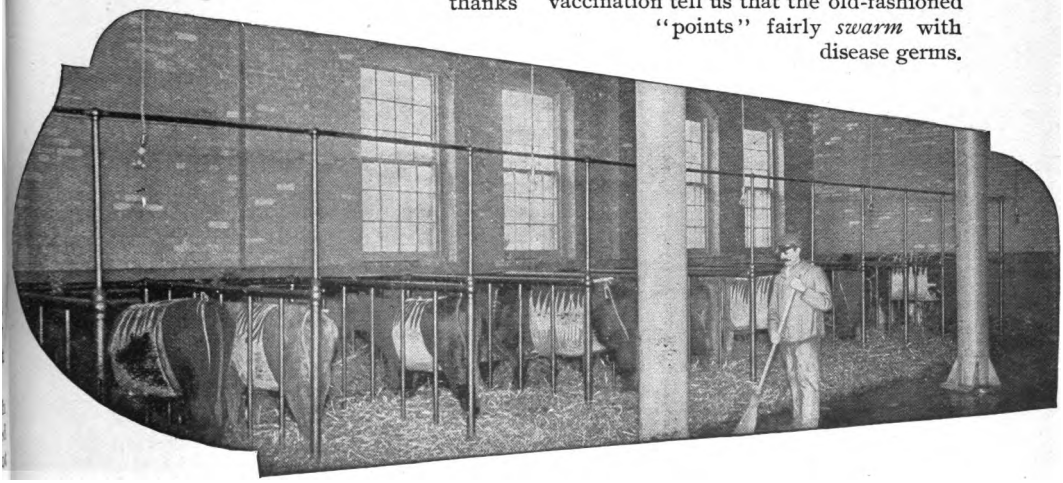

FIG. 3.—One Row of Inoculated Heifers in Propagating Room.

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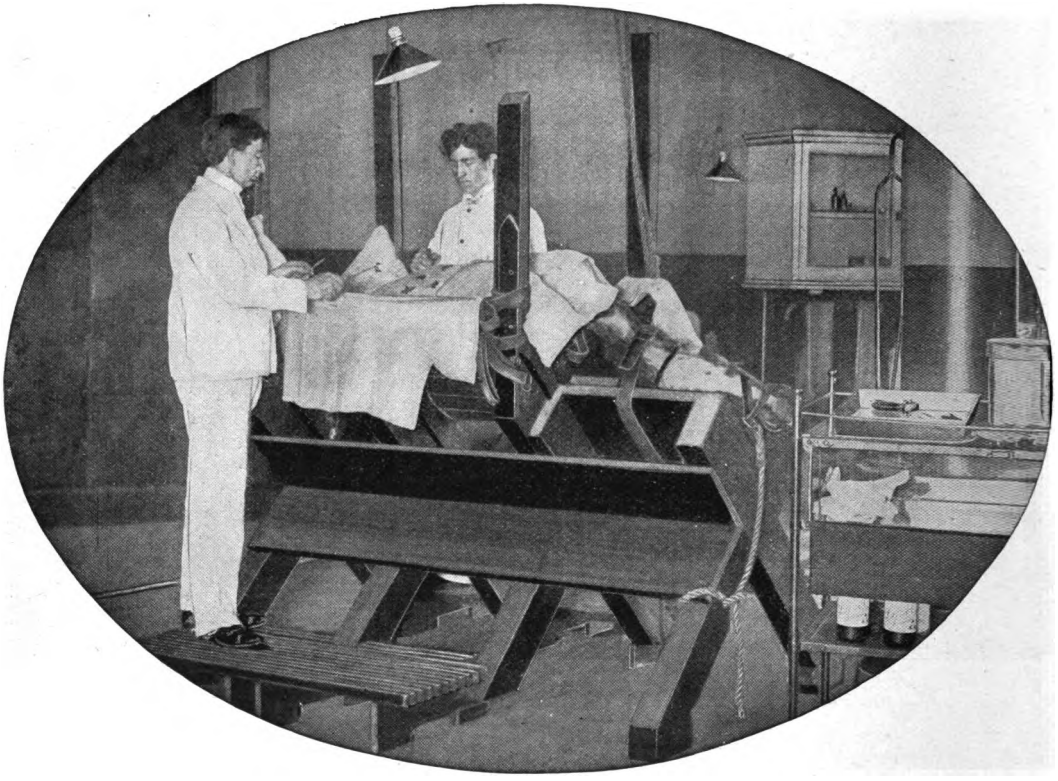

FIG. 4.—Collecting the Vaccine.

THE PROBLEM FAIRLY STATED.

When we decided to place vaccine on the market under our label, we felt that *at any cost* our product must be *the best product obtainable*, otherwise we had better keep out of the vaccine business. And now we purpose to sketch very briefly and rapidly the means we use to preserve our vaccine from infection—measures of asepsis and antisepsis which could hardly be made more minute and painstaking in a modern hospital where patients are prepared for dangerous operations.

THE ANIMAL.

We use only the healthy heifer about eighteen months old. The animal is first carefully examined by our Veterinarian, Dr. E. A. A. Grange (formerly Michigan State Veterinarian), for any evidence of disease, external or internal. A ringworm on a heifer is enough to condemn it. *The Tuberculin test is applied in every case*, and any heifer which exhibits a suspicious rise of temperature is rejected.

INOCULATING THE HEIFERS.

When the animal is finally pronounced to be in perfect health, it is scrubbed from head to foot and taken into the Operating Room—a large, high chamber, with cement floor and varnished walls susceptible of ready cleansing and disinfection. Here, with the aid of a convenient apparatus (see Fig. 4), the heifer is placed on its back; the abdominal surface is thoroughly lathered, washed, and *shaved*, and is then scrubbed once more with sterilized water; it is then washed thoroughly with a disinfectant solution; and after a final washing with sterilized water, the abdomen is ready for

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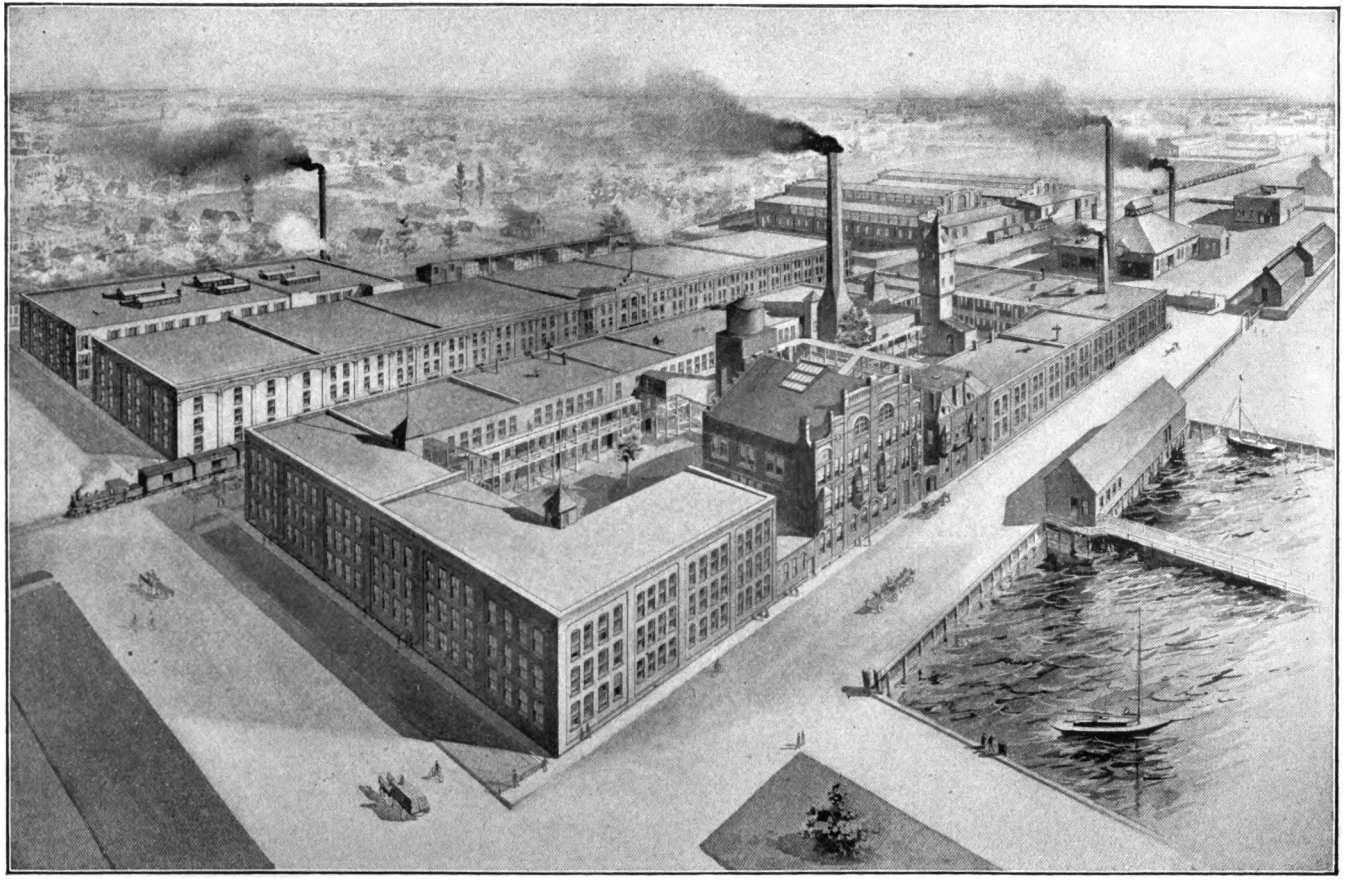

PARKE, DAVIS & CO.'S OFFICES AND LABORATORIES AT DETROIT, MICH.

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SCARIFICATION.

This is performed quickly with sterilized instruments. The "seed" vaccine is applied, rubbed in thoroughly, and permitted to dry. The "field" of operation is then covered with an *aseptic and impenetrable* cement which effectually excludes germs. Over the cement we place a layer of absorbent cotton, and over the cotton a protective bandage.

(Other manufacturers of vaccine merely cleanse the abdominal surface. So far as we are aware, they do not use a disinfectant, nor do they cover the "field" with anything, simply allowing nature to form a scab.)

The heifers are now ready for the

PROPAGATING ROOM.

Fig. 3 shows one row of iron stalls. Here the inoculated animals are kept for about five days. Men are on hand constantly to collect feces, etc., all excreta being removed from the room immediately.

COLLECTING THE VIRUS.

After about five days the heifer returns to the Operating Room. The hoofs are carefully cleaned, and the various cleansing operations described above as preliminaries to inoculation are now *repeated.*

The dressings are removed; the whole field of operation is cleansed with sterilized water and disinfectant solution;

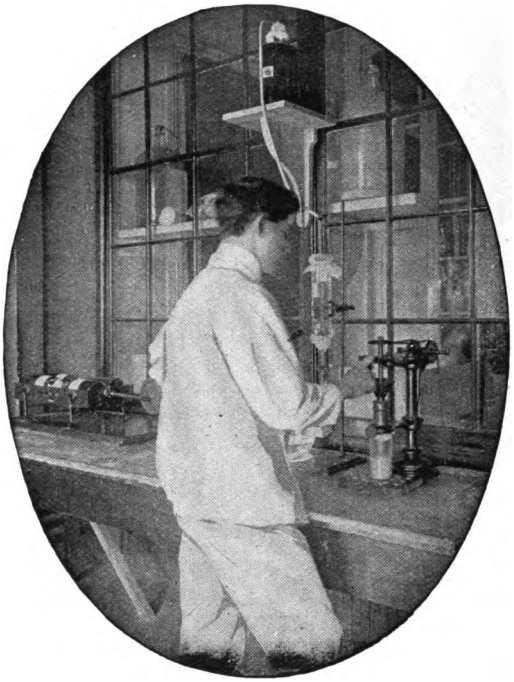

FIG. 5.—Grinding Vaccine with Glycerin—Emulsifying Apparatus to the Left.

and the external scab is removed *and destroyed.*

The pulp of the vaccine vesicles with exuding serum is now carefully collected with sterilized spoon curettes and placed in sterilized containers filled with glycerin.

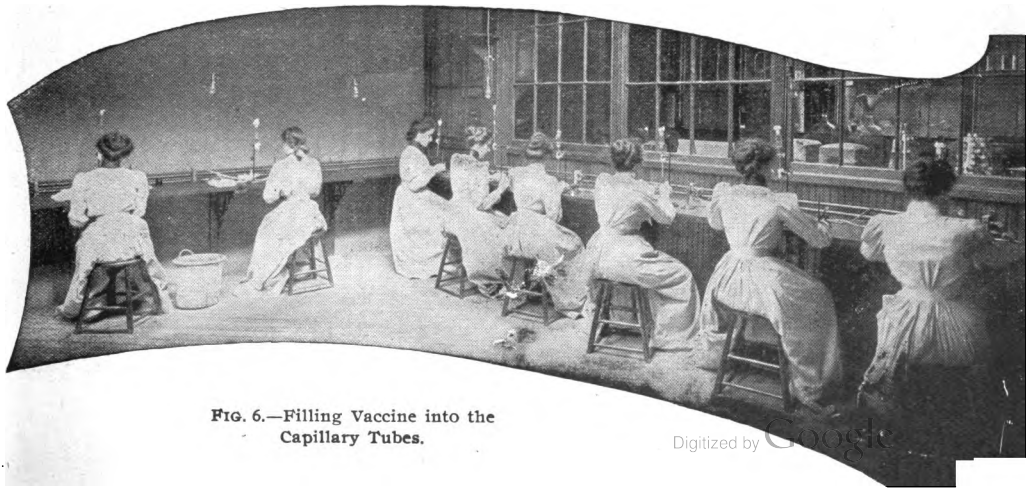

FIG. 6.—Filling Vaccine into the Capillary Tubes.

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MANIPULATION OF THE LYMPH.

The vaccine is now brought to our Biological Laboratory, and is run through sterilized grinders until a *homogeneous mixture* is obtained. The requisite amount of diluent is added, and the mixture is shaken for several hours in a specially devised shaking apparatus in order to make a perfect emulsion.

SEARCHING SCRUTINY OF THE FINISHED PRODUCT.

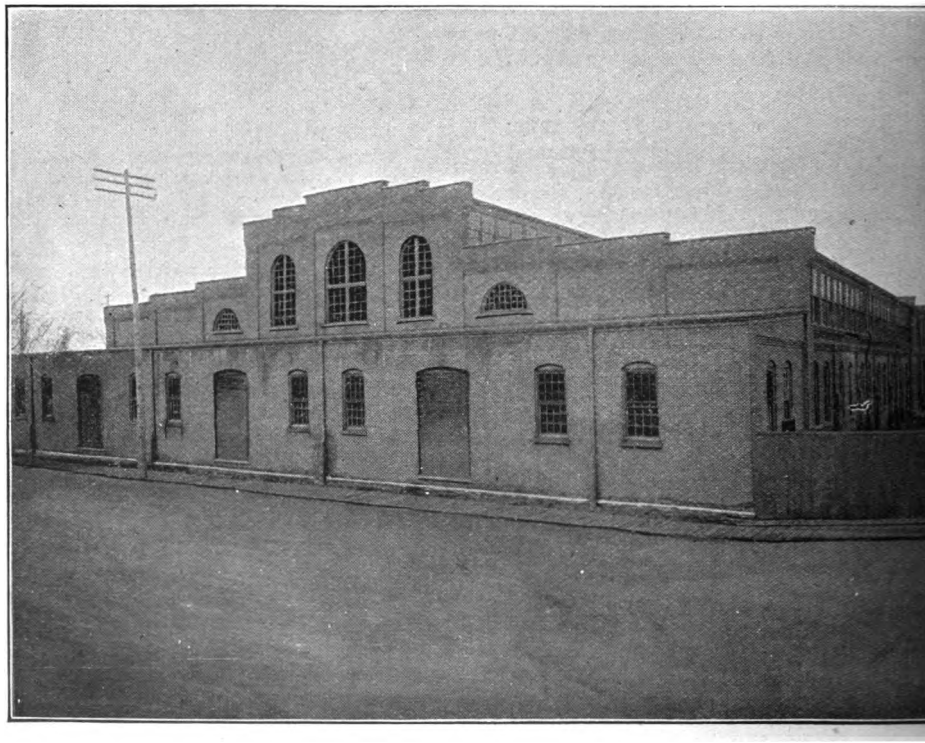
The vaccine is now examined *bacteriologically and physiologically.* Every single parcel of our vaccine is tested on heifers before we permit it to go out on the market under our label. And in the great majority of cases our vaccine is tested for activity on children as well.

If our test requirements are fulfilled, it is filled by skilled operatives into sterilized tubes, in an Aseptic Room especially designed for the purpose. Each tube is examined to satisfy us that both ends are absolutely closed.

PROPER STORAGE OF VACCINE STOCK.

The sealed tubes are at once placed in a refrigerator and kept there until needed for orders. We aim to send out only strictly fresh vaccine, and our stock is changed every week. The proper storage of vaccine by our patrons is of the utmost importance. Vaccine is a most delicate and perishable product. *Keep it in a cool*

DEVOTED EXCLUSIVELY TO



These are the "Twin Stables" of our Biological Department—the home of mc

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dark place (best of all, in a refrigerator), and by all means avoid exposing it for any length of time to a temperature above 70° F. During warm summer weather vaccine deteriorates very fast.

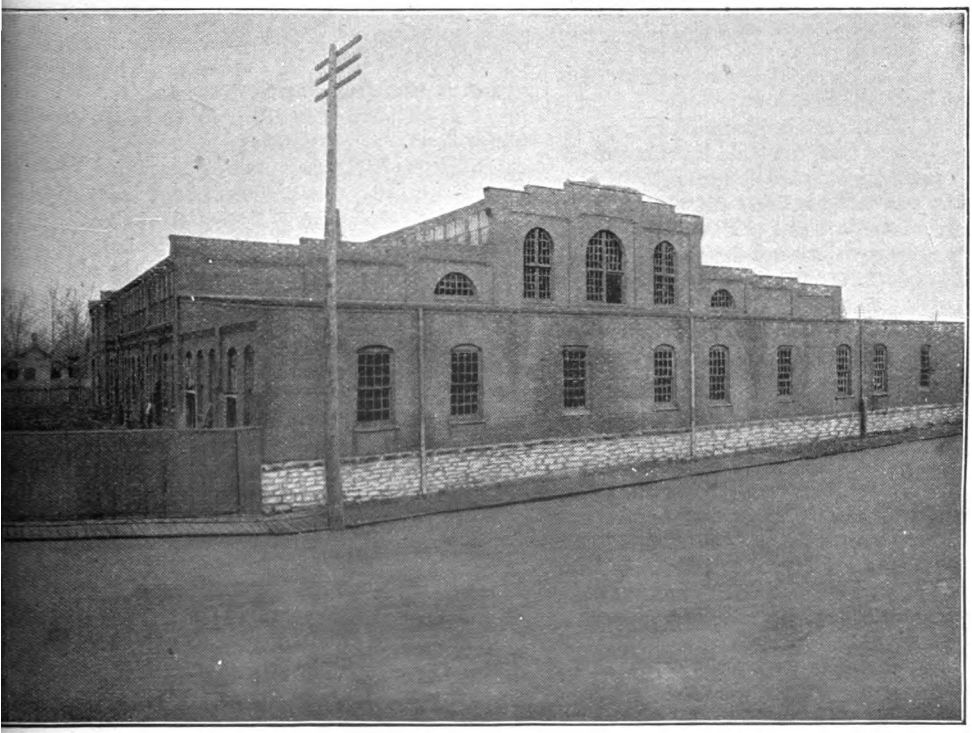
THE "SEED" VACCINE.

This is, of course, the corner-stone of our process: and we insure its activity by our stringently careful preservation and by frequent tests.

WHAT THE TRUE VACCINIA VESICLE LOOKS LIKE.

Pray, remember that the so-called vesicle is the *only reliable indication* that the vaccine has "taken." *There is absolutely no other proof for or against the vaccine.* A hole in a man's arm half an inch deep—a scar two inches long—proves nothing (except that infection more or less serious has occurred), and neither one affords any guarantee of protection against smallpox. On the other hand, Jenner himself declared that a full measure of such protection is imparted by a single vesicle. The latter varies in size, but is usually *umbilicated* or depressed in the center. At one stage in its growth the vesicle is filled with pearly-gray matter. Often it is small and escapes observation. *Pure vaccine ought to produce only a mild reaction.* Violent symptoms, local or constitutional, point to infection, either from the vaccine itself or through careless exposure of the wounded arm *after* vaccination.

ANTITOXINS AND VACCINES.



n 4500 animals, large and small. Buildings and paddocks cover the entire square.

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CHLORETONE,* A SAFE HYPNOTIC AND LOCAL ANESTHETIC.

MYOCARDIOGRAPHIC TRACINGS MADE IN OUR PHARMACOLOGICAL DEPARTMENT—CHLORETONE DOES NOT DEPRESS THE HEART.

BY E. M. HOUGHTON, PH.C., M.D.,
Lecturer on Experimental Pharmacology in the Detroit College of Medicine, Detroit, Mich.,
AND
T. B. ALDRICH, PH.D.,
Late Associate in Physiologic Chemistry in the Johns Hopkins University, Baltimore, Md.

PRINCIPAL EFFECTS.

The main action of the drug is confined to the central nervous system, it being essentially the same as that of the other anesthetics and hypnotics of the fatty acid series, differing from most of the members of this group in not depressing the circulatory system. Chloretone, besides its central action, possesses local anesthetic properties in a marked degree, resembling cocaine in many respects. Indeed, it will probably be found a useful substitute for the last named drug, as the small amounts introduced subcutaneously to produce insensibility to pain in surgical work are entirely harmless.

Blood-serum and other organic fluids are preserved for an indefinite time if saturated with chloretone, a little more than 0.5 per cent of the substance being dissolved. Culture experiments with various kinds of bacteria also prove that chloretone possesses considerable antiseptic properties.

THERAPEUTIC PROPERTIES.

Chloretone has been quite extensively employed clinically; we may briefly outline its therapeutic properties as follows:

In cases of lacerated wounds, burns, etc., it is very efficacious in lessening pain when the injured parts are freely bathed in aqueous solutions of the drug. Owing to its antiseptic properties it may be used independently as a surgical disinfectant, or if a strong antiseptic action is desired it can be employed in conjunction with mercuric chloride, carbolic acid, etc.

Pain and uncontrollable vomiting of gastric origin may frequently be relieved very quickly by its internal administration. In one instance the drug proved especially useful in checking the persistent vomiting of gastric carcinoma. It may be possible that it will prove to be a useful therapeutic agent in preventing or controlling seasickness, vomiting in pregnancy, etc., as laboratory experiments quite conclusively show that it renders the mucous membrane of the alimentary canal insensible to irritants. Mustard, when given in an aqueous solution of Chloretone to dogs, fails to provoke emesis, the animal usually going quietly to sleep. That the mustard produces the usual amount of irritation is shown by the fact that if on the following day the animal is killed and the intestine examined, its walls are found much inflamed, the parts coming in contact with the mustard in some instances being nearly vesicated.

AS A HYPNOTIC,

Chloretone is frequently efficacious in various conditions. Especially good results have been obtained from the exhibition of the drug in cases of persistent insomnia in the aged; also in cardiac disease with renal complications accom-

* In order to avoid confusing this product with "acetone chloroform" (a name which has been applied to chloroform made from acetone), we have deemed it advisable to use the name "Chloretone."

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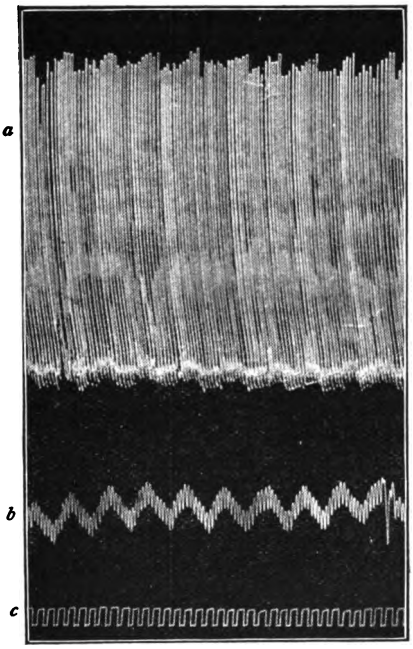

FIG. 1.—Myocardiogram showing the action of heart and blood-pressure (normal) at 9 A.M.: *a*, Heart action, right ventricle; *b*, blood-pressure, right carotid artery; *c*, time marker (seconds).

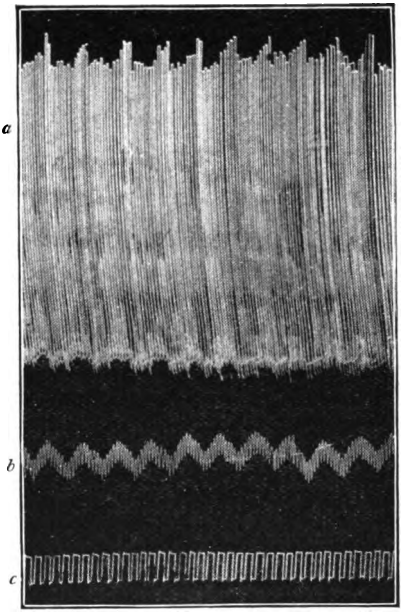

FIG. 2.—Myocardiogram showing the heart action and blood-pressure under Chloretone at 5.30 P.M. *a*, Heart action, right ventricle; *b*, blood-pressure, right carotid artery; *c*, time marker (seconds).

NOTE.—The animal was kept under Chloretone all day, the drug having been given per os. No reduction in blood-pressure or in the force of the systole is indicated at expiration of eight and one-half hours.

panied by high arterial tension. In many instances where morphine, chloral, trional, etc., have been unsatisfactory, Chloretone has been successful. Morphine, as is well known, increases the excitability of the nervous system when administered in large doses, and is frequently objectionable on this account. Chloral is quite irritating to the stomach and depresses the heart's action. Chloretone does not possess any of these disadvantages, being only rarely followed by disagreeable after-effects. Occasionally, when large hypnotic doses have been given, drowsiness occurs on the following day.

In general we may summarize our claims for this drug by stating that its action on the central nervous system is similar to that of the anesthetics and hypnotics of the fatty acid series, without depressing the centers of the medulla; locally, it acts like cocaine, as a peripheral anesthetic.

It is too early to prophesy what position Chloretone will take in medicine, but the results as

A HYPNOTIC AND LOCAL ANESTHETIC

are very encouraging. As high as sixty grains has been given at one time, without producing any untoward symptoms. From six to twenty grains, given in tablets at a single dose, followed by a drink of water or milk, seems to be quite sufficient to produce the desired results. Possibly the drug will prove to be

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A USEFUL GENERAL ANESTHETIC

when administered in large doses; or it may be given before chloroform or ether, and allow complete anesthesia to be produced by the use of a minimum amount of chloroform or ether. Perhaps such administration may prevent the annoying vomiting that so frequently occurs when a patient is being anesthetized. Chloretone is nearly an ideal anesthetic for use in experimental surgery, physiology, pharmacology, etc., as has been abundantly demonstrated by Abel of Johns Hopkins, Cushny of Ann Arbor, and our own experience in the laboratory for several years past. We have nearly completed an exhaustive systematic investigation of the chemical and pharmacological properties of chloretone, which will be published in detail in the near future.—*Journal of the American Medical Association*, Sept. 23, 1899.

SUCCESSFUL VACCINATION WITH OUT INFECTION.

BY THOMAS B. HORTON, M.D., BALTIMORE, MD.,
Vaccine Physician for the Fifth District of Anne Arundel County, Maryland.

Recently my attention was drawn to the Aseptic Vaccine of Messrs. Parke, Davis & Co., of Detroit, Mich. I believe it comes as near to the ideal standard of perfection as it is possible to approach. Aseptic Vaccine consists of the virus from selected healthy young cattle suspended in glycerin and hermetically sealed in capillary glass tubes. The greatest amount of care to prevent contamination and the most minute attention to details is the secret of obtaining Aseptic Vaccine.

I have used the Aseptic Vaccine of Parke, Davis & Co. in over 300 cases during the past few months. As a striking example of its freedom from contaminating germs I would call attention to the somewhat noteworthy fact that *in no single instance did a sore arm result.* Most of these vaccinations were conducted under rather unfavorable circumstances. For instance, a large number of those operated upon were employees in packing houses, where, from a sanitary standpoint, the surroundings were by no means what they should have been. Furthermore, the men, who were mostly foreigners, were not particular on the score of personal cleanliness. Yet, notwithstanding these trying conditions, the vaccinations were very successful, and I had no cases of severely sore arms.—*Charlotte Medical Journal*, August, 1899.

THE TREATMENT OF OBESITY WITH THYREOIDS.

BY F. W. HAMMOND, M.D., WYOCENA, WISCONSIN.

For the past two months I have had under my care a case of obesity. The treatment has consisted in the use of Thyreoids (P., D. & Co.), which reduced the patient's weight from 221 to 197 pounds, a difference of twenty-four pounds, in that time. Previously the woman complained of neuralgia in her shoulder and back, great dyspnea upon the least exertion, palpitation of the heart, frequent headaches, and a "tired feeling." At that time her pulse-rate was 130 per minute; now it is 96, and the other enumerated symptoms are greatly relieved. During the first month the dose of "Thyreoids" was two grains, given in capsules, morning and evening; during the second month it was increased to two grains, three times daily. At the present time the weight of this patient is gradually declining, and her general health is growing correspondingly better.

SIX HUNDRED VACCINATIONS IN A FEW WEEKS WITH GOOD RESULTS.

We have used your Aseptic Vaccine (Glycerinated) in about 600 cases this fall, and have had good results. We were careful in the sterilization of the site of vaccination and had no bad arms. —E. R. SWINBURNE, M.D., Heppner, Oregon.

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Therapeutic Notes.

Published at irregular intervals, and sent free on application.
Inquiries and communications should be addressed to:
Literary Department,
PARKE, DAVIS & CO.,
Detroit, Mich.

[The following editorial expressions, issued from our Literary Department, and representing our message to the medical profession, embody convictions for the assertion of which we assume entire responsibility.—PARKE, DAVIS & CO.]

EDITORIAL.

IT POSITIVELY DOES NOT DEPRESS THE HEART.

Hundreds of Carefully Conducted Experiments Prove that Chloretone, Unlike the Older Hypnotics, Does Not Reduce the Force of the Cardiac Systole nor Lower the Blood-Pressure.

We publish on another page an excerpt from a valuable paper which recently appeared in the *Journal of the American Medical Association*, on Chloretone, the very promising new hypnotic and anesthetic. Accompanying the article are reproductions of tracings made by means of a delicate apparatus which graphically represents the condition of the heart.

The first tracing shows the character of the ventricular action and the status of the blood-pressure under normal conditions; the second portrays the same phenomena after the animal had been *under a full anesthetic dose of Chloretone for eight and a half hours.*

A careful comparison of the two records fails to disclose the least evidence of a deleterious effect of the drug upon the heart or blood-vessels.

We believe this cannot be said of any one of the older hypnotics, nearly all of which notably depress the heart. Those that appear not to affect the force of the systole markedly reduce the blood-pressure by dilating the arterioles. Chloretone gives every indication of becoming a very useful and perfectly safe hypnotic, local anesthetic, and antiseptic. It is being used with the greatest success as a general anesthetic on animals, and it is not altogether unlikely that it may be used for the same purpose in general medicine when physicians become more familiar with its valuable properties.

WHOSE FAULT IS IT?

Occasionally the vaccine manufacturer is blamed—and wrongfully, too, in the majority of instances—for untoward results in vaccination. Every lot of Aseptic Vaccine which issues from our Biological Department is first tested physiologically to insure its activity, and bacteriologically to determine its freedom from harmful microorganisms. If, therefore, the contents of two or more tubes in any package yield successful vaccinations, the failure of the remainder should not be regarded as a reflection upon the product.

The logical basis of this assumption is certainly manifest. All the tubes in a case are filled with exactly the same vaccine: wherefore the success of two or more vaccinations is presumptive proof that the failures are due to extraneous causes which have operated to frustrate the purpose of the operator or deteriorate the vaccine after it passed from our hands—factors, it is plain to be seen, over which we have no control.

246 Primary Vaccinations, with No Serious Results.

Last May I vaccinated all of the inmates of the State Soldiers' Orphans' Home, using your Aseptic Vaccine (Glycerinated). We recorded twenty-four failures out of 246 primary vaccinations. None of our successful cases presented any serious results, and I cannot recall any child losing a day at school from vaccination.—N. K. MCCORMICK, M.D., Normal, Ill.

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THE VALUATION OF DRUGS.

THE ACTIVE DISTINGUISHED FROM THE INERT BY PHYSIOLOGICAL TESTS.

[Extract from Editorial, "The Standardization of Drugs," in the *Medical News*, of New York, September 9, 1899, page 339.]

Why, it is asked, should no standards be fixed for such drugs as ergot, digitalis, strophanthus, aconite, and cannabis indica? They all are in universal use, and their quantitative standard is of as much consequence to the physician and patient as that of any other medicine. "It matters little," as one authority observes, "how much crude ergot goes to the pound of extract if the product fails to produce a characteristic physiologic action." What, then, is the objection to standardizing these drugs as well as others? Only this, that the drugs in question are not amenable to chemical assay, or at all events cannot in the present state of chemical knowledge be assayed chemically with a sufficient degree of accuracy to justify the fixing of a standard, measured quantitatively. But is this any reason why no attempt should be made to fix a standard by other means? Scientific inquirers conducting private investigations are not content to rest there, and neither are the higher class of manufacturing chemists. Acknowledging and making use of the chemical test whenever it can be applied with satisfactory results, they have recourse to physiological tests, which as regards the question of potency are for all practical purposes equally reliable. At present, as has been pointed out, a practitioner who writes a prescription, say for digitalis, in a dozen different parts of the same town will find in some instances that he obtains a drug which exhibits a satisfactory physiologic action, and in others no satisfactory action whatever. This is submitting the drug to a physiologic test when it is too late. *If, instead of leaving the patient to be experimented on, similar tests had previously been made with the article on some of the lower animals, the potency of the drug would have been known, and the doctor would be aware of the exact strength as well as the nature of the remedy he was prescribing.* The present condition of matters is eminently unsatisfactory, as shown by the discussion at the recent meeting of the American Medical Association at Columbus, and it is hoped that the Revision Committee will provide an adequate remedy. It should be fortified by expressions of opinion from medical men and manufacturers, it being to the interest of none, so far as we can see, except traders in inferior drugs, to oppose the principle of physiologic standardization.

AN INTERESTING EXPERIENCE WITH EUTHYMOL.

Dr. Bernard Wolff, of Atlanta, Georgia, Declares that Euthymol Relieves the Pain of the Hornet's Sting.

While away on my vacation I was stung on the finger by a hornet. I saturated a bit of cotton with Euthymol and applied it to the site of the puncture. The relief from pain was immediate.

Later on my wife was stung on the ankle by a hornet and experienced the same immediate relief from the stinging and throbbing pain. A few days later one of the pestiferous little insects paid his respects to my little daughter by stinging her on the ear. The child ceased crying almost immediately after the application of Euthymol.

Other members of the household were subsequently stung, and their experience corroborates what I have said in reference to the efficacy of Euthymol in hornet stings.

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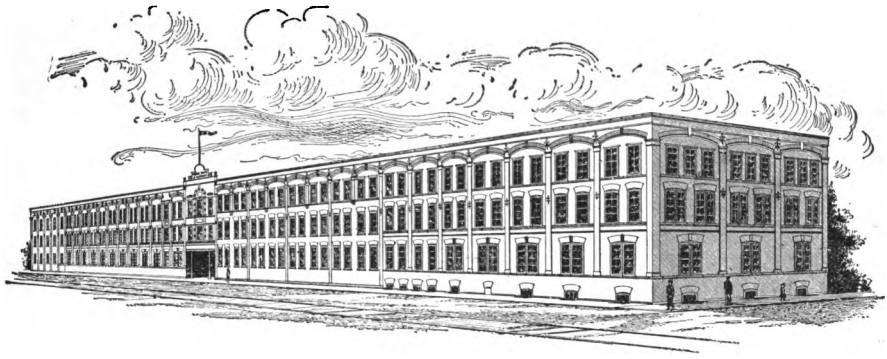
518 FEET BY 60 FEET, THREE STORIES HIGH.

The Dimensions of Our New Annex Now in Course of Construction.

Although our present property covers three entire city squares, with an additional square recently acquired, the steady increase in the volume of business has necessitated the construction of extensive buildings and the installation of new machinery of the most approved design.

We are at present engaged in the erection of an additional laboratory, 518 feet in length, 60 feet wide, and three stories high, with a basement. The western half



of this building will be occupied by the Fluid Extract Department and the Bottle Storage Department. The eastern half will be thoroughly fitted out for the use of the Digestive Ferment Department, the Alkaloid Department, the Printing Department, the Drying Plant, and the Machine and Carpenter Shops. The space now occupied by these departments in the older buildings will be utilized in the expansion of contiguous divisions in the main laboratory.

A thoroughly modern equipment will be the feature of the new laboratory. On account of the vast quantities of products to be handled, a complete system of trolley conveyers will be employed to transport bulky packages throughout the building.

An additional power plant will be erected in the courtyard of the main laboratory and will include two powerful 200 horse power compound engines and two 125 kilowatt dynamos.

THE PRESCRIBING OF SECRET PHARMACEUTICAL PREPARATIONS DISCOUNTENANCED.

At a recent meeting of the Wayne County (Michigan) Medical Society, Dr. Emil Amberg read the report of a committee appointed to consider what should be the duty of the Society respecting proprietary medicines. The report discountenanced the prescribing of such pharmaceutical preparations as are secret, either as to the ingredients or their quantities. It objected to none of those preparations whose complete formulæ are known, where such preparations had been found by actual prescribing to produce the effects claimed for them respectively. The report was adopted by the Society.

Our many friends in the medical profession are undoubtedly well aware that we have always conformed strictly to the ethical requirements set forth in the above report. Our laboratories are ever open to the inspection of physicians, with whom we take particular pains to explain our methods. The complete formulæ of all preparations are printed in our various Lists and upon the labels of the respective packages. Every process and every preparation is open to the full-

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est investigation, and our constant aim is to supply the profession with pure Standardized medicaments only.

The physician who specifies P., D. & Co. on his prescriptions need entertain no doubt as to the quality and therapeutic activity of his chosen remedies.

LIQUOR SEDANS IN A NEW ROLE.

One of our esteemed medical correspondents, who resides in a malarial region, reports that he has been very much gratified with the action of Liquor Sedans as a uterine sedative. On account of the prevalence of malaria, which complicates many of the cases he is called upon to treat, his prescriptions frequently include quinine in varying proportions. He felt that he was handicapped in the treatment of malarial manifestations in pregnant women, as on account of the oxytocic properties of quinine he hesitated to prescribe the drug. He found, however, that Liquor Sedans exerted such a marked sedative effect that when administered simultaneously with quinine the latter could safely be continued, in doses sufficient to accomplish the desired effect, and without the least untoward symptom of uterine disturbance. We hope this experience may be of service to other practitioners who may happen to be similarly situated.

COCILLAÑA AS AN EXPECTORANT.

This drug was discovered in Bolivia in 1886, by H. H. Rusby, M.D., and after its value had been thoroughly demonstrated we introduced it to the medical profession.

Dr. Rusby states that Cocillaña contains a strongly active principle somewhat related to emetine in its physiological action. This principle seems to be excreted chiefly through the mucous membrane of the respiratory tract. He recommends it highly in the local treatment of acute or chronic nasal catarrh and thinks it might be of service in hay-fever. But its chief value must depend on the fact that its peculiar action can be promptly secured upon the entire respiratory mucosa. Its properties are evidently expectorant, tonic, and laxative.

Dr. R. W. Wilcox, of the Post-Graduate School, New York City, emphatically declares that Cocillaña in many cases may be substituted with advantage for ammonium carbonate, strychnine, and other drugs classed with more or less reason as expectorants. Clinical experience seems also to have established the fact that it exerts a marked tonic influence upon the appetite; that it reduces the night sweats of chronic bronchitis and phthisis without inducing constipation.

We prepare a very reliable fluid-extract of Cocillaña, the dose of which is from ten to thirty minims (0.6 to 2.0 Cc.). We shall be pleased to send, post-paid, to any physician our brochure, No. 17, which contains a complete description of the drug and its properties, together with a number of valuable clinical reports.

Euthymol an Ideal Preparation.

I find Euthymol an ideal preparation, and use it often, mainly in sore throat, in the following form:

℞ Euthymol, ʒ j.
Glycerin, ʒ ss.
Potassium chlorate, ʒ j.
Water, sufficient to make ʒ iv.
Use as a gargle every half hour or so.

I prefer your preparations because I get the best results from them. I think they are the best on the market.—J. L. HUMMEL, M.D.

An Excellent Formula for the Treatment of Chronic Rheumatism.

℞ Potassii Iodidi, ʒ ij-ʒ iv.
Vini Colchici Radicis (P., D. & Co.), ʒ ij.
Elix. Manacæ et Salicylatum (P., D. & Co.), q. s. ad ʒ iij.
M. Sig.: ʒ j ter in die.

The Editor of the *Virginia Medical Semi-Monthly*, in that journal for February 24, page 678, says: "In this section practitioners are using vaccine as derived from Messrs. Parke, Davis & Co., with satisfactory results."

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RESULTS OF THE USE OF ANTI-TETANIC SERUM AT THE ROOSEVELT HOSPITAL.

[Editorial in the *Medical Mirror*, September, 1899.]

In commenting upon the number of cases of tetanus which followed the Fourth of July celebration, this year, and the treatment of a number of those cases in the Roosevelt Hospital by Dr. Robert Abbe and Dr. H. O. Marcy, Jr., the editor of the *Mirror*, Dr. I. N. Love, remarks:

"Three cases in order were set aside for the administration of serum which the hospital secured from the house of Parke, Davis & Co., of New York and Detroit. The bacteriologists of this establishment have made careful researches into this serum and were confident that it would prove efficient in such a number of cases as would warrant the trial. The resources of this laboratory were therefore placed at the service of the hospital, and the work of administration was begun in the presence of a large assemblage of medical men. It is sufficient to say that all three cases, in which the Parke, Davis & Co. serum was used, have passed the most dangerous period and are now progressing to satisfactory recovery.

"This record compares very satisfactorily with the results from the other serum and with the vain efforts to treat the disease by medicine."

HOW TO AVOID VARIATION IN THE STRENGTH OF ANTITOXIN.

At the February meeting of the Pasadena Medical Society, Dr. Stanley Black stated that the different manufacturers of Antitoxin have different standards of strength, and that the term unit means one thing with one brand, and another thing with a different brand. Dr. Van Slyck stated that he had used Parke, Davis & Co.'s Serum exclusively, and therefore he had observed no variation in the strength. Dr. Black said that Dr. McClintock, of Ann Arbor, one of the ablest bacteriologists of America, had the general supervision of the manufacture of Antitoxin for P., D. & Co., and that he had no doubt their Antitoxin was reliable.

THE MORAL EFFECT OF GOOD VACCINE VIRUS.

[Excerpt from the *Indiana Medical Journal*, February, 1899, page 317.]

The bovine vaccine virus used in Indianapolis within the month has "taken" almost universally. The glycerinated lymph in tubes has been very generally used. The Aseptic Vaccine of Parke, Davis & Co. has been used by a large number of Indianapolis physicians. No infected sore arms have resulted as yet. The bovine vaccine virus has stood the test. The experience of the month with good virus has done much to remove the opposition to vaccination.

THE TREATMENT OF ENURESIS.

Much benefit may be derived from the systematic administration of the following mixture:

℞ Ext. Rhois Aromaticæ Fl. (P., D & Co.), ʒ ijss.
Ext. Ergotæ Fl. (P., D. & Co.), ʒ iv.
Ext. Belladonnæ Fl. (P., D. & Co.), ʒ ss.
Strychninæ Sulphatis, gr. ¼.
Syrupi Aurantii Corticis, q. s. ad ʒ iv.

Misce. Sig.: Teaspoonful four times a day.

During the recent smallpox epidemic in Denver, when doctors were vaccinating their patients by families, there was much discussion over the value of the different kinds of vaccine virus. The matter was brought up in the Arapahoe County Medical Society, and the universal opinion was that the Glycerinated Vaccine of Parke, Davis & Co. gave the best results. Those who had tried other vaccine almost invariably got septic infection, owing to lack of care in the preparation of the virus. It comes in securely sealed individual glass tubes, each passing bacteriological and physiological scrutiny before going to the public.—*Colorado Medical Journal*, April, 1899.

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CLINICAL REPORTS.

Promptly Satisfactory Results with Antidiphtheritic Serum.

For three years I used only the German antitoxin, being slow to place faith in that of American manufacture. Finally, in an extremity, I was compelled to use some of the serum put up by your firm. The results were so promptly satisfactory that I now specify "P., D. & Co." in prescribing. Your serum is good enough and as good as the best. My cases have all recovered. The larger doses, 1500 to 2000 units, give best results.—JOHN J. THOMAS, M.D., Youngstown, O.

Ninety-seven Per Cent of Successes.

I have used only P., D. & Co.'s virus, even though more expensive. I have just counted my empty wooden boxes (each containing ten tubes) and find eighty-six in the drawer, where I threw them when empty. Out of this number I think I have had but two failures in primary vaccinations, and in all just twenty-six. What or who can show better or more specific results? I attribute this to the virus, P., D. & Co.'s.—DR. M. W. O'BRIEN, Alexandria, Va., Surgeon for the Southern Railroad.

No Case Lost from Typhoid Fever Since Using the Woodbridge Treatment.

In the *Medical World* for August, 1899, page 321, we find the following statement: "I have never lost a case of Typhoid Fever since I began using the Woodbridge Tablets. . . . Those of the profession who have not tried the above will do well to test them for themselves."—J. G. ATKINSON, M.D., Bristol, N. B., Canada.

Beef Jelly in Appendicitis.

In the dietetic and supporting treatment of appendicitis, where liquid diet is indicated, as it is in operative or inoperative cases, as well as in many other debilitating conditions, I have used Parke, Davis & Co.'s Beef Jelly with the greatest satisfaction.—WILLIAM M. HARSHA, M.D., in the *Journal of the American Medical Association*, Aug. 5, 1899.

A Handsome Tribute.

I have given several thorough trials to Solution Iron Peptonate and Manganese, P., D. & Co. In no case has it failed to meet my fullest expectations. I regard it as one of your many triumphs in the production of elegant and useful pharmaceutical products.—E. A. FISHER, M.D., Bryant, South Dakota.

Believes the Antidiphtheritic Serum to be a Specific.

I believe your Antidiphtheritic Serum is a specific. In my experience it cured a case of laryngeal diphtheria that could not have recovered without it. All similar cases that I had seen, in fourteen years' experience in the practice of medicine, died.—W. G. HOUSEAL, M.D., Newberry, S. C.

Good Results from the Professional Standpoint.

Euthymol Tooth Paste (P., D. & Co.) has proved very satisfactory to patients who are using it regularly, with good results from the professional standpoint.—DR. J. A. CRONKHITE, Dentist, Los Angeles, Cal.

Mercurol in the Treatment of Gonorrhea.

Numerous clinical reports on the action of Mercurol in the treatment of gonorrhea indicate that it has a specifically destructive effect upon the gonococcus.

An Ideal Tonic Laxative.

No preparation has given better satisfaction in my hands than Fluid Extract Cascara Sagrada, P., D. & Co.—H. E. NOBLE, M.D., Toledo, Ohio.

I can buy much cheaper products of Cascara, but they fail in my hands to give results such as I secure from yours.—A. W. CAREY, M.D., Wild Rose, Wis.

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POWERFUL GERMICIDE AND DISINFECTANT.

IT DOES NOT ATTACK NICKEL OR STEEL INSTRUMENTS. IT DOES NOT COAGULATE ALBUMEN. THE MOST POWERFUL OF GERMICIDES. COMMENDED BY THE ABLEST BACTERIOLOGISTS. REPRINTS OF DR. Mc CLINTOCK'S ORIGINAL PAPER AND REPORTS OF OTHER BACTERIOLOGISTS MAILED ON APPLICATION.

PARKE, DAVIS & COMPANY.

Home Offices and Laboratories, Detroit, Michigan.
Branches in New York, Kansas City, Baltimore, New Orleans, & Montreal, Que. Branch Laboratories, London, Eng. & Walkerville, Ont.

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ASEPTIC VACCINE

PHYSIOLOGICALLY AND BACTERIOLOGICALLY TESTED.

(GLYCERINATED)

We guard every step with uncompromising scrutiny, and assure the Purity of the Product by the most rigid antiseptic and aseptic measures.

Our Aseptic Vaccine is put up in sealed glass capillary tubes, each holding sufficient for one vaccination, in cases of ten tubes, and of three tubes, with small rubber bulb to expel the contents.

Price, $1.00 per Case, 10 tubes.
Price, .35 per Case, 3 tubes.

Applying the Vaccine to patient's arm directly from the tube.

ONE OF THE MANY REPORTS OF ITS EFFICACY WHICH WE ARE RECEIVING EVERY DAY.

CITY OF DETROIT,
SEPT. 14, 1899.

We, the undersigned medical inspectors of the Board of Health of the City of Detroit, have vaccinated 840 persons within the past two months with Aseptic Vaccine made by Parke, Davis & Co. The virus is perfect, the successful vaccinations comprising fully 98 per cent of the total number.

DOUGLASS LONG, M.D.
E. H. TROY, M.D.

Home Offices and Laboratories, Detroit, Michigan.

Parke, Davis & Co.

Branches in New York, Kansas City, Baltimore, New Orleans, and Montreal, Que.

Branch Laboratories: London, Eng., and Walkerville, Ont

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Look Here... For Them!

THE REMEDIES FOR FALL AND WINTER USE.

It is our aim, in submitting the following formulas, to direct your particular attention to a list of remedies in different forms for the treatment of acute, capillary and chronic bronchitis, ordinary coughs and colds, and the many throat irritations so prevalent in the fall and winter months. When ordering or prescribing, specify P., D. & Co.

COMPRESSED TABLETS No. 17.

COCAINE AND CUBEB COMPOUND.

Cocaine hydrochlorate,	1-12 gr.
Ammonium chloride,	2 grs.
Ext. Glycyrrhiza,	2 grs.
Oleoresin Cubeb,	1-8 min.

COMPRESSED TABLETS No. 59.

BROWN MIXTURE, 100 MINIMS.

Each tablet represents 100 minims compound mixture of Glycyrrhiza, U.S.P. 1890, and contains:

Ext. Glycyrrhiza,	2 grs.
Powd. Opium,	1-20 gr.
Benzoic acid,	1-20 gr.
Camphor,	1-20 gr.
Antimony and Potassium tartrate,	1-40 gr.
Oil Anise,	1-20 minim.

COMPRESSED TABLETS No. 105.

VOICE.

Potassium chlorate,	2 1-2 grs.
Sodium borate,	2 1-2 grs.
Cocaine hydrochlorate,	1-60 gr.

COMPRESSED TABLETS No. 158.

EXPECTORANT (TONIC).

Strychnine sulphate,	1-60 gr.
Tinct. Digitalis,	2 minims.
Terpin hydrate,	3 grs.
Powd. Opium,	1-24 gr.
Ext. Hyoscyamus,	1-4 gr.

COMPRESSED TABLETS No. 162.

GUAIAC AND HYDRASTIS COMPOUND (THROAT).

Guaiac,	2 grs.
Ammonium chloride,	2 grs.
Fluid Golden-seal (colorless),	1 minim.
Ext. Glycyrrhiza,	2 grs.

COMPRESSED TABLETS No. 320.

COUGH (DR. J. B. GOODWIN).

Sanguinarine nitrate,	1-60 gr.
Morphine sulphate,	1-60 gr.
Atropine sulphate,	1-600 gr.
Antimony and Potassium tartrate,	1-25 gr.
Tinct. Aconite,	1-10 min.
Powd. Ipecac,	1-10 gr.
Pine Tar,	1-4 gr.

COMPRESSED TABLETS No. 325.

BRONCHIAL.

Ammonium chloride,	1-3 gr.
Ext. Glycyrrhiza,	1 gr.
Balsam Tolu,	1-5 gr.
Oleoresin Cubeb,	1-6 min.
Powd. Hyoscyamus,	1-4 gr.
Powd. Senaga,	1-5 gr.
Powd. Ipecac,	1-50 gr.

COMPRESSED TABLETS No. 330.

THROAT (MENTHOLATED).

Menthol,	1-35 gr.
Cocaine hydrochlorate,	1-280 gr.
Oil Anise,	1-80 min.
Benzoic acid,	1-12 gr.
Eucalyptol,	1-16 min.

COMPRESSED TABLETS No. 336.

BROWN MIXTURE AND AMMONIUM CHLORIDE.

EACH TABLET REPRESENTS:

Compound Mixture of Glycyrrhiza,	85 mins.
Ammonium chloride,	3 grs.

CHOCOLATE-COATED TABLETS No. 32.

BRONCHITIS.

Tinct. Aconite,	1-5 min.
Tinct. Bryonia,	1-10 min.
Tinct. Belladonna leaves,	1-10 min.
Sulphurated Antimony,	1-100 gr.
Potassium bichromate,	1-100 gr.

CHOCOLATE-COATED TABLETS No. 62.

COLD, No. 3.

EACH TABLET REPRESENTS:

Quinine sulphate,	2 grs.
Ipecac and Opium powder,	2 grs.
Powd. Capsicum,	1-4 gr.
Tinct. Aconite,	1 min.

CHOCOLATE-COATED TABLETS No. 66.

CORYZA (DR. H. J. KENYON).

Camphor,	1-2 gr.
Quinine sulphate,	1-2 gr.
Morphine sulphate,	1-64 gr.
Atropine sulphate,	1-2000 gr.

CHOCOLATE-COATED TABLETS No. 197.

COLD (LAXATIVE).

EACH TABLET REPRESENTS:

Quinine hydrobromate,	2 grs.
Ipecac and Opium powder,	2 1-2 grs.
Aloin,	1-8 gr.
Mercurous chloride, mild,	1-8 gr.
Powd. Capsicum,	1-2 gr.
Tinct. Aconite,	1-2 min.

CHOCOLATE-COATED TABLETS No. 204.

COLD, No. 4 (DR. H. L. COIT).

Aconite,	1-10 gr.
Camphor,	1-10 gr.
Powd. Opium,	1-10 gr.
Potassium nitrate,	1-10 gr.

CHOCOLATE-COATED TABLETS No. 205.

COUGH (PALLIATIVE).

Ext. Indian Cannabis,	1-4 gr.
Codeine sulphate,	1-4 gr.

TABLET TRITURATES No. 182.

AMMONIUM CHLORIDE COMPOUND.

Ammonium chloride,	1-4 gr.
Ext. Glycyrrhiza,	1-10 gr.
Powd. Cubeb,	1-8 gr.

TABLET TRITURATES No. 266.

AMMONIUM CHLORIDE AND CODEINE COMPOUND.

Ammonium chloride,	1-4 gr.
Ext. Glycyrrhiza,	1-10 gr.
Powd. Cubeb,	1-8 gr.
Codeine,	1-25 gr.

TABLET TRITURATES No. 295.

BROWN MIXTURE, 60 MINIMS.

EACH TABLET CONTAINS:

Ext. Glycyrrhiza,	53-80 gr.
Benzoic acid,	3-100 gr.
Antimony and Potassium tartrate,	3-200 gr.
Oil Anise,	3-100 min.
Powd. Opium,	3-100 gr.
Camphor,	3-100 gr.

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TABLET TRITURATES No. 645.

TONSILLITIS.

Tinct. Aconite,	1-5 min.
Tinct. Bryonia,	1-10 min.
Tinct. Belladonna leaves,	1-10 min.
Mercuric iodide, red,	1-100 gr.

TABLET TRITURATES No. 648.

PAREGORIC COMP.

EACH TABLET REPRESENTS:

Tinct. Opium, camphorated.	10 mins.
Powd. Squill,	1-25 gr.
Powd. Ipecac,	1-50 gr.

TABLET TRITURATES No. 653.

THROAT
(DR. QUINLAN).

EACH TABLET REPRESENTS:

Benzoic acid,	1-5 gr.
Tinct. Belladonna leaves,	1 min.
Opium Camph. Tinct.,	10 mins.
Ext. Glycyrrhiza,	q. s.

TABLET TRITURATES No. 698.

FOLLICULAR TONSILLITIS.

Tinct. Aconite,	1-5 min.
Tinct. Belladonna leaves,	1-10 min.
Tinct. Bryonia,	1-10 min.
Mercuric iodide, red,	1-100 gr.
Morphine sulphate,	1-100 gr.
Sodium salicylate,	1 gr.
Oil Gaultheria,	1-60 min.

TABLET TRITURATES No. 707.

BRONCHITIS
(DR. DELAFIELD).

Ext. Belladonna leaves,	1-60 gr.
Ipecac and Opium powder,	1-10 gr.
Powd. Ipecac,	1-20 gr.
Quinine sulphate,	1-4 gr.

TABLET TRITURATES No. 706.

COLD AND FEVER
(DR. EVAN F. SMITH).

EACH TABLET REPRESENTS:

Camphor monobromated,	1-10 gr.
Tinct. Aconite,	1-4 min.
Tinct. Bryonia,	1-4 min.
Tinct. Gelsemium,	1-4 min.
Tinct. Eupatorium,	1-4 min.

TABLET TRITURATES No. 736.

ANODYNE EXPECTORANT
(DR. BOLTON).

Ammonium chloride,	1 gr.
Antimony and Potassium tartrate,	1-80 gr.
Sanguinarine nitrate,	1-100 gr.
Morphine sulphate,	1-50 gr.

Our Compressed Tablets, Chocolate-coated Tablets, and Tablet Triturates are handsomely put up in bottles containing . . . **1000, 500, 100.**

SOLUBLE ELASTIC CAPSULES.

EACH CAPSULE CONTAINS:

Beechwood Creosote,	2 mins.
Oil Eucalyptus,	2 mins.
Oil Santal (pure),	2 mins.

DOSE—One to three capsules four times a day for an adult.

SOLUBLE ELASTIC CAPSULES.

EACH CAPSULE CONTAINS:

Quinine sulphate,	5 grs.
Powd. Capsicum,	1 gr.

Our Soluble Elastic Capsules are put up in boxes of 1 dozen, 2 dozen, and 100 each.

LOFOTEN COD-LIVER OIL.

EGG EMULSION OF COD-LIVER OIL.
(FORMULA OF L. S. HEWITT.)

Contains 40 per cent of pure Cod-Liver Oil, combined with the nutrients, Egg and Brandy.

DOSE—1 teaspoonful to 1 tablespoonful (4 to 15 Cc.) after meals.

Our Cod-Liver Oil and Egg Emulsion of Cod-Liver Oil are put up in pint bottles.

MALT EXTRACT WITH COD-LIVER OIL,
10 PER CENT.

This preparation presents the nutritive and digestive principles of selected Canada Barley Malt. DOSE—One tablespoonful three times daily during meals or immediately after. If taken in wine, milk, or water, the immediate value of the malt will be enhanced.

MALT EXTRACT WITH YERBA SANTA.

EACH FLUIDOUNCE REPRESENTS:

Eriodictyon,	30 grs.

This preparation presents the nutritive and digestive principles of selected Canada Barley Malt. DOSE—One tablespoonful three times daily during meals or immediately after. If taken in wine, milk, or water, the immediate value of the malt will be enhanced.

ANODYNE PINE EXPECTORANT.

EACH FLUIDOUNCE REPRESENTS:

White Pine bark,	30 grs.
Spikenard root,	4 grs.
Sassafras,	2 grs.
Balsam Poplar buds (Balm of Gilead)	4 grs.
Chloroform,	4 mins.
Wild Cherry,	30 grs.
Sanguinaria,	3 1-2 grs.
Morphine acetate,	3-16 gr.

DOSE—1-2 to 2 teaspoonfuls (2 to 8 Cc.) every 3 hours.

BRONCHIAL SEDATIVE.
FORMULA OF S. W. PALMER, M. D.

EACH FLUIDOUNCE CONTAINS:

Ammonium chloride,	30 grs.
Fluid Tolu Soluble,	8 mins.
Fluid Opium Camphorated,	4 mins.

Combined with Glycyrrhiza and aromatics.

DOSE—For adults 1 teaspoonful (4 Cc.).

GLYCEROLE YERBINE COMPOUND.

EACH FLUIDOUNCE REPRESENTS:

Eriodictyon,	90 grs.
Potassium bromide,	7 1-2 grs.
Glycyrrhiza,	90 grs.
Grindelia,	30 grs.
Wild Cherry,	30 grs.
Pine Tar,	2 3-4 grs.
Salicylic acid,	2 grs.

A sedative expectorant.

DOSE—1 to 2 teaspoonfuls (4 to 8 Cc.).

ELIXIR GRINDELIA.

EACH FLUIDOUNCE REPRESENTS:

Grindelia,	120 grs.

DOSE—1 to 2 teaspoonfuls (4 to 8 Cc.)

ELIXIR TERPIN HYDRATE & CODEINE.

EACH FLUIDOUNCE CONTAINS:

Terpin hydrate,	8 grs.
Codeine sulphate,	1 gr.

DOSE—1 to 4 fluidrachms (4 to 15 Cc.).

Our Malt Extract, Anodyne Pine Expectorant, Bronchial Sedative, Glycerole Yerbine Compound, and Elixirs are up in one-half gallon and pint bottles.

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